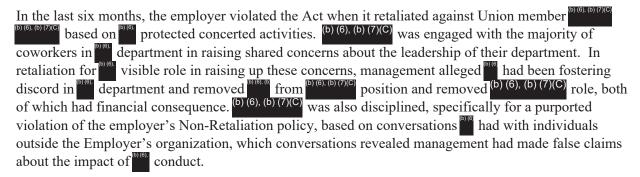
UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	19-CA-300475	Date Filed 8/1/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in 1. EMPL	which the alleged unfair labor practice occurred or is occu .OYER AGAINST WHOM CHARGE IS BROUGHT	rring.
a. Name of Employer		b. Tel. No.
MultiCare Deaconess Hospital		253-403-1260
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-mail
800 W 5th Ave	(b) (6), (b) (7)(C)	
Spokane, WA 99204		(b) (6), (b) (7)(C) @multicare.org
		h. Number of workers employed 669
i. Type of Establishment (factory, mine, wholesaler, etc.) Hospital	j. Identify principal product or service Healthcare	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of secti	on 8(a), subsections (1) and
(list subsections) (3)		Relations Act, and these unfair labor
practices are practices affecting commerce within the memeaning of the Act and the Postal Reorganization Act.	aning of the Act, or these unfair labor practices are prac	tices affecting commerce within the
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor pr	ractices)
See attached.		
3. Full name of party filing charge (if labor organization, g SEIU Healthcare 1199NW	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code	e)	4b. Tel. No.
15 S Grady Way Suite 200 Renton, WA 98057		425-917-1199
		4c. Cell No. 425-919-7271
		4d. Fax No. 425-917-9707
		4e. e-mail laurelw@seiu1199nw.org
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be filled i	
Service Employees Internation	onal Union	
	ARATION	Tel. No.
	ve charge and that the statements ny knowledge and belief.	425-917-1199
are true to the best of the	(b) (6), (b) (7)(C)	Office, if any, Cell No. (b) (6), (b) (7)(C)
ntative or person making charge) (Print/type name and title or office, if any) Fax No.		Fax No. 425-917-9707
Address 15 S Grady Way Suite 200 Renton, WA 98057 Date 8/1/2022 e-mail @seiu1199nw.org		
		w sold i roonw.org

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT



UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	19-CA-300487	Date Filed 8/1/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occur	ring.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Catapult NW		b. Tel. No. 206-649-5224
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code) 3405 Lind Ave SW Renton, WA 98057	(b) (6), (b) (7)(C)	g. e-mail support@catapultnw.com
		h. Number of workers employed Approx 25
i. Type of Establishment (factory, mine, wholesaler, etc.) warehouse	j. Identify principal product or service food distribution	,
The above-named employer has engaged in and is engage (list subsections) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the National Labor	Relations Act, and these unfair labor
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor pra	actices)
During the past six months, the above-named empling their exercise of Section 7 rights by threatening conditions of employment and by making new rule	to enforce every rule strictly because employees of es about access to the warehouse during and after	complained about their terms and
3. Full name of party filing charge (if labor organization, go UNITE HERE Local 8	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code) 19415 International Boulevard, Suite 313 SeaTac, WA 98188 4b. Tel. No. 206-728-2326 4c. Cell No.		
		4c. Cell No.
		4d. Fax No. 206-728-9772
		4e. e-mail
5. Full name of national or international labor organization UNITE HERE International Union	n of which it is an affiliate or constituent unit (to be filled in	when charge is filed by a labor organization)
I declare that I have read the abo	ARATION ve charge and that the statements by knowledge and belief.	Tel. No. 415-597-7200
	Kristin L. Martin, Attorney	Office, if any, Cell No.
(signature of representative or person making charge) McCracken, Stemerman & Holsberr 475 14th Street, Suite 1200	(Print/type name and title or office, if any) y, LLP	Fax No. 415-597-7201
Address Oakland, CA 94612	Date August 1, 2022	e-mail klm@msh.law

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

FIRST AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
19-CA-300487	10/7/2022	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.			
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer Catapult NW		b. Tel. No. 206-649-5224	
		c. Cell No.	
Address (Observation and 710 ands)	-1-5	f. Fax. No.	
d. Address (Street, city, state, and ZIP code) 3405 Lind Ave SW Renton, WA 98057	(b) (6), (b) (7)(C)	g. e-mail support@catapultnw.com	
		h. Number of workers employed Approx 25	
i. Type of Establishment (factory, mine, wholesaler, etc.) warehouse	j. Identify principal product or service food distribution		
The above-named employer has engaged in and is engage	ging in unfair labor practices within the meaning of section {	B(a), subsections (1) and	
(list subsections)	of the National Labor Re	elations Act, and these unfair labor	
practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor practices are practice	es affecting commerce within the	
meaning of the Act and the Postal Reorganization Act.			
Within the past six months, the above-named Empunion and/or protected concerted activity; 2) Impliprotected concerted activity; 3) Promulgated new r by prohibiting employees from having cell phones from accessing the warehouse during non-work ho drivers' vehicles because employees engaged in unbecause		ecause employees engaged in they engaged in union and/or otected concerted activity including for clocking in, banning drivers r drivers;4) Installed cameras in	
3. Full name of party filing charge (if labor organization, go UNITE HERE Local 8	ive full name, including local name and number)		
4a. Address (Street and number, city, state, and ZIP code) 19415 International Boulevard, Suite 313 SeaTac, WA 98188 4b. Tel. No. 206-728-2326 4c. Cell No.			
		4c. Cell No.	
		4d. Fax No. 206-728-9772	
		4e. e-mail	
5. Full name of national or international labor organization UNITE HERE International Union	of which it is an affiliate or constituent unit (to be filled in wi	hen charge is filed by a labor organization)	
I declare that I have read the abo	ARATION ve charge and that the statements by knowledge and belief.	Tel. No. 415-597-7200	
K	Kristin L. Martin, Attorney	Office, if any, Cell No.	
(signature of representative or person making charge) McCracken, Stemerman & Holsberr	(Print/type name and title or office, if any) y, LLP	Fax No. 415-597-7201	
Address Oakland, CA 94612	Date October 7, 2022	e-mail klm@msh.law	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

SECOND AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
	Date Filed	
19-CA-300487	11/14/2022	

INSTRUCTIONS:		
File an original with NLRB Regional Director for the region in 1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	ng.
a. Name of Employer Catapult NW		b. Tel. No. 206-649-5224
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code) 3405 Lind Ave SW	(b) (6), (b) (7)(C)	g. e-mail
Renton, WA 98057		support@catapultnw.com
		h. Number of workers employed Approx 25
i. Type of Establishment (factory, mine, wholesaler, etc.) warehouse	j. Identify principal product or service food distribution	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of section	8(a), subsections (1) and
(list subsections) (3)	of the National Labor R	Relations Act, and these unfair labor
practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor practices are practic	ces affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor prac-	ctices)
and/or protected concerted activity; 2) Impliedly the concerted activity; 3) Promulgated new rules becaute prohibiting employees from having cell phones on accessing the warehouse during non-work hours are vehicles because employees engaged in union and/or protected concerted activities.	ity.	engaged in union and/or protected concerted activity including by r clocking in, banning drivers from vers;4) Installed cameras in drivers'
3. Full name of party filing charge (if labor organization, g UNITE HERE Local 8	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code 19415 International Boulevard, Suite 313 SeaTac, WA 98188	e)	4b. Tel. No. 206-728-2326
Seatac, WA 90100		4c. Cell No.
		4d. Fax No. 206-728-9772
		4e. e-mail
5. Full name of national or international labor organization UNITE HERE International Union	n of which it is an affiliate or constituent unit (to be filled in n	when charge is filed by a labor organization)
I declare that I have read the abo	ARATION we charge and that the statements ny knowledge and belief.	Tel. No. 415-597-7200
Lead to the best of the	Kristin L. Martin, Attorney	Office, if any, Cell No.
(signature of representative or person making charge) McCracken, Stemerman & Holsberr	(Print/type name and title or office, if any) y, LLP	Fax No. 415-597-7201
475 14th Street, Suite 1200 Address Oakland, CA 94612	Date November 14, 2022	e-mail klm@msh.law
·	· · · · · · · · · · · · · · · · · · ·	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-300542	8/1/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in		ring.
	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Zullee (Kabob House)		(509) 426-8347
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
2706 Nob Hill Blvd Suite 103	(b) (6), (b) (7)(C)	g. e-mail
WA Yakima 98902		h. Number of workers employed 15
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
	Fast casual Mediterranean restaurant	
The above-named employer has engaged in and is engaged	ung in unfair labor practices within the meaning of section	on 8(a) subsections (1) and
(list subsections) 1		r Relations Act, and these unfair labor
practices are practices affecting commerce within the me		
meaning of the Act and the Postal Reorganization Act.		Aloos arrosang sommerso warm are
Basis of the Charge (set forth a clear and concise state)	ament of the facts constituting the alleged unfairlaborn	ractices
2. Dasis of the charge (set forth a clear and concise state	ernem of the racis constituting the alleged unial labor p	actices)
See additional page		
(b) (6), (b) (7)(C) rty filing charge (if labor organization, g	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP cod	e)	4b. Tel. No.
		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c. Cell No.
		4.5
		4d. Fax No.
		4e. e-mail
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit (to be filled in	n when charge is filed by a labor organization)
	ARATION	Tel. No.
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		(509) 557-0587
are tide to the pest of the	iy kilomougo aliu bollol.	Office, if any, Cell No.
	Gabriel Gutierrez Attorney	
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
507 W Chestnut Ave		e-mail
Address Yakima WA 98902	Date 08/01/2022 01:52:59 PM	ggutierrez@fairworkcenter.org

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

8(a)(1)

Within the previous six months, the Employer discharged an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, discussing wages and/or other terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee discharged	Approximate date of discharge
(b) (6), (b) (7)(C)	(D) (E) (D) (7) /2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE	IN THIS SPACE
^{Case} 19-CA-300635	Date Filed 8/2/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the Region in which the alleged unfair labor practice occurred or is occurring

1. EMPLOYER AGAINST	WHOM CHARGE IS BROUGHT		
a. Name of Employer		b. Tel. No. (b) (6), (b) (7)(C)	
Franciscan Medical Group		(b) (6) (b) (7)(C)	
		c. Cell No. (b) (6), (b) (7)(C)	
		f. Fax No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-Mail (b) (6), (b) (7)(C) @commonspirit.org	
2420 S State St Stop 20-15, Tacoma, WA 98405	(b) (6), (b) (7)(C)	h. Number of workers employed 20+	
i. Type of Establishment (factory, mine, wholesaler, etc.)	. Identify principal product or service		
Medical Facility	Medical Care Facility		
The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce with the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act			
Within the last six months the above-named employer has protected activity 3. Full name of party filing charge (if labor organization, give			
Union of American Physicians and Dentists		<u>, </u>	
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No. (916) 442-6977253	
520 Capital Mall, Suite 220 Sacramento, CA 95814		4c. Cell No. (909) 408-0445	
		4d. Fax No.	
	4e. e-Mail rflores@uapd.com		
5. Full name of national or international labor organization of filed by a labor organization) American Federation of State, County, and Municipal Er	·	e filled in when charge is	
6. DECLARATION		Tel. No. (510) 337-1001	
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		Office, if any, Cell No.	
Dans Araufold	DAVID A. ROSENFELD	Fax No. (510) 377-1023	
(signature of representative or person making charge)	(Print/type name and title or office, if any)	e-Mail nlrbnotices@unioncounsel.net	
Address: Weinberg, Roger & Rosenfeld 1375 55 th Street Emeryville, CA 94608	August 2, 2022 (date)	drosenfeld@unioncounsel.net	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

	DO NOT WRITE IN THIS SPACE	
Case		Date Filed
	19-CA-300663	8/2/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occur	nng.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
		(206) 318-2212
Starbucks Corporation		c. Cell No.
		f. Fax. No.
1.411 (0) (3) (4) (7/10 (4)	- Faralaura Danas antatius	_
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-mail
3625 Broadway	Howard Schultz, CEO	hschultz@starbucks.com
_	Troward Schurtz, CLO	nsonanzagsanzouens.com
Everett, WA 98201		h. Number of workers employed
		approx. 29
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	11
Coffee Shop	Food and Beverage	
The above-named employer has engaged in and is engaged		on 8(a) subsections (1) and (5) of the
National Labor Relations Act, and these unfair labor pract are practices affecting commerce within the meaning of the	ices are practices affecting commerce within the meanin	
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor pra	actices)
Within the past six months, the Employer e	0 0	_
announced it would close the store three ho	_	
Union and asked each worker, without a U	nion representative, whether they consent	ted to the hours change.
3. Full name of party filing charge (if labor organization, ga	ive full name, including local name and number)	
Workers United		
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No.
		(646) 448-6414
Workers United		4c. Cell No.
22 South 22 nd St		
Philadelphia, PA 19103		4d. Fax No.
•		(215) 575-9065
		4e. e-mail
		rminter@pjbwu.org
Full name of national or international labor organization	of which it is an affiliate as constituent unit the he filled in	-
_	TO WHICH IT IS All allillate of constituent unit (to be filled in	when charge is filed by a labor organization)
Service Employees International Union		
6 DECL	ADATION	Tel. No.
6. DECLARATION I declare that I have read the above charge and that the statements		(206) 257-6001
are true to the best of my knowledge and belief.		` '
Office, if any, Cell No.		
Marina Multhaup, Attorney		
(signature of representative or person making charge) (Print/type name and title or office, if any)		Fax No.
Barnard İglitzin & Lavitt LLP		(206) 378-4132
18 West Mercer St., Ste. 400 Address Seattle, WA 98119 Date 08/02/2022		e-mail
		multhaup@workerlaw.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-300663	12/2/2022

INSTRUCTIONS:

hours of the 37 th & Broadway store where the Union is certified, and, on about August 1 and 8, 2022, unilaterally implemented changes, adjusting the hours of work and work schedules of unionized baristas and shift supervisors without notice to the Union opportunity to bargain. In addition, beginning on about July 31, 2022, the Employer, through (b) (6), (b) (7)(C) , engaged in unlawful direct dealing to asked each worker, without a Union representative present, whether they consented to the proposed hours changes. Also, within the last six months, the Employer has failed and refused to provide the Union with relevant information it requested on August 2, 2022, pertaining to these changes to the store's operating hours. 3. Full name of party filing charge (if labor organization, give full name, including local name and number)	
Starbucks Corporation Continue Continue	
d. Address (Street, city, state, and ZIP code) d. Address (Street, city, state, and ZIP code) d. Address (Street, city, state, and ZIP code) e. Employer Representative g. e-mail hschultz@starbucks.com h. Number of workers employed approx. 29 i. Type of Establishment (factory, mine, wholesaler, etc.) i. Type of Establishment (factory, mine, wholesaler, etc.) The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (5) of National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices affecting commerce within the meaning of the Act, or these unfair labor practices affecting commerce within the meaning of the Act, or these unfair labor practices affecting commerce within the meaning of the Act, or these unfair labor practices of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the past six months, on about July 25, July 29, and July 30, 2022, the Employer announced that it would be changing the ophours of the 37th & Broadway store where the Union is certified, and, on about August 1 and 8, 2022, unilaterally implemented changes, adjusting the hours of work and work schedules of unionized baristas and shift supervisors without notice to the Union opportunity to bargain. In addition, beginning on about July 31, 2022, the Employer, through (b) (6), (b) (7)(C) engaged in unlawful direct dealing vasked each worker, without a Union representative present, whether they consented to the proposed hours changes. Also, within the last six months, the Employer has failed and refused to provide the Union with relevant information it requested on August 2, 2022, pertaining to these changes to the store's operating hours.	
d. Address (Street, city, state, and ZIP code) 8. Employer Representative 9. e. Employer Representative 1. Type of Establishment (factory, mine, wholesaler, etc.) 1. Type of Establishment (factory, mine, wholesaler, etc.) 1. Type of Establishment (factory, mine, wholesaler, etc.) 1. Identify principal product or service Food and Beverage Food and Beverage The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (5) of National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the past six months, on about July 25, July 29, and July 30, 2022, the Employer announced that it would be changing the ophours of the 37th & Broadway store where the Union is certified, and, on about August 1 and 8, 2022, unilaterally implemented changes, adjusting the hours of work and work schedules of unionized baristas and shift supervisors without notice to the Union opportunity to bargain. In addition, beginning on about July 31, 2022, the Employer, through (b) (6), (b) (7)(C) engaged in unlawful direct dealing to asked each worker, without a Union representative present, whether they consented to the proposed hours changes. Also, within the last six months, the Employer has failed and refused to provide the Union with relevant information it requested on August 2, 2022, pertaining to these changes to the store's operating hours.	
Broadway Everett, WA 98201 Howard Schultz, CEO Howard Schultz, CEO	
Everett, WA 98201 Howard Schultz, CEO hschultz@starbucks.com h. Number of workers employed approx. 29 i. Type of Establishment (factory, mine, wholesaler, etc.) i. Identify principal product or service Food and Beverage The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (5) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the past six months, on about July 25, July 29, and July 30, 2022, the Employer announced that it would be changing the ophours of the 37th & Broadway store where the Union is certified, and, on about August 1 and 8, 2022, unilaterally implemented changes, adjusting the hours of work and work schedules of unionized baristas and shift supervisors without notice to the Union opportunity to bargain. In addition, beginning on about July 31, 2022, the Employer, through (b) (6), (b) (7)(C) engaged in unlawful direct dealing to asked each worker, without a Union representative present, whether they consented to the proposed hours changes. Also, within the last six months, the Employer has failed and refused to provide the Union with relevant information it requested on August 2, 2022, pertaining to these changes to the store's operating hours. 3. Full name of party filing charge (if labor organization, give full name, including local name and number)	
i. Type of Establishment (factory, mine, wholesaler, etc.) j. Identify principal product or service Food and Beverage The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (5) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the past six months, on about July 25, July 29, and July 30, 2022, the Employer announced that it would be changing the ophours of the 37th & Broadway store where the Union is certified, and, on about August 1 and 8, 2022, unilaterally implemented changes, adjusting the hours of work and work schedules of unionized baristas and shift supervisors without notice to the Union opportunity to bargain. In addition, beginning on about July 31, 2022, the Employer, through (b) (6), (b) (7)(C) , engaged in unlawful direct dealing wasked each worker, without a Union representative present, whether they consented to the proposed hours changes. Also, within the last six months, the Employer has failed and refused to provide the Union with relevant information it requested on August 2, 2022, pertaining to these changes to the store's operating hours. 3. Full name of party filing charge (if labor organization, give full name, including local name and number)	
i. Type of Establishment (factory, mine, wholesaler, etc.) Coffee Shop Food and Beverage The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (5) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the past six months, on about July 25, July 29, and July 30, 2022, the Employer announced that it would be changing the ophours of the 37th & Broadway store where the Union is certified, and, on about August 1 and 8, 2022, unilaterally implemented changes, adjusting the hours of work and work schedules of unionized baristas and shift supervisors without notice to the Union opportunity to bargain. In addition, beginning on about July 31, 2022, the Employer, through (b) (6), (b) (7)(C) , engaged in unlawful direct dealing wasked each worker, without a Union representative present, whether they consented to the proposed hours changes. Also, within the last six months, the Employer has failed and refused to provide the Union with relevant information it requested on August 2, 2022, pertaining to these changes to the store's operating hours. 3. Full name of party filing charge (if labor organization, give full name, including local name and number)	
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opportunity to bargain. In addition, beginning on about July 31, 2022, the Employer, through (b) (6), (b) (7)(C) , engaged in unlawful direct dealing vasked each worker, without a Union representative present, whether they consented to the proposed hours changes. Also, within the last six months, the Employer has failed and refused to provide the Union with relevant information it requested on August 2, 2022, pertaining to these changes to the store's operating hours. 3. Full name of party filing charge (if labor organization, give full name, including local name and number)	l these
Workers United	
4a. Address (Street and number, city, state, and ZIP code) 4b. Tel. No.	
Werkers United (646) 448-6414	
22 South 22 nd St	
Philadelphia, PA 19103 4d. Fax No. (215) 575-9065	
4e. e-mail rminter@pjbwu.org	
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organiservice Employees International Union	ration)
6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Tel. No. (206) 257-6001	
Office, if any, Cell No.	
Marina Multhaup, Attorney (signature of representative or person making charge) Barnard Iglitzin & Lavitt LLP Marina Multhaup, Attorney (Print/type name and title or office, if any) Fax No. (206) 378-4132	
Address Seattle, WA 98119 Date 12/02/2022 e-mail multhaup@workerlaw.	com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
19-CA-300781	8/3/2022	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occu	rring.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
USPS		(509) 225-1389
		c. Cell No.
		f. Fax. No.
d Address (Street situates and 710 and 1	e. Employer Representative	_
d. Address (Street, city, state, and ZIP code) 205 W Washington Ave		g. e-mail
	USPS	
WA Yakima 98909		h. Number of workers employed
		200
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Others	USPS	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of section	on 8(a), subsections (1) and
(list subsections) 3	of the National Labo	r Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are prac	ctices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	ractices)
See additional page		
See additional page		
(b) (6), (b) (7)(C) party filing charge (if labor organization, g	rive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP cod	e)	4b. Tel. No.
		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c. Cell No.
		(b) (6), (b) (7)(C)
		4d. Fax No.
		4e. e-mail
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit /to be filled i	
o. I di manie of national of international labor organizatio	The whom it is an animate of constituent anit (to be timed t	when charge is nieu by a labor organization)
	ARATION	Tel. No.
	ove charge and that the statements	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) are true to the best of n	ny knowledge and belief.	Office, if any, Cell No.
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)		
		Fax No.
of representative or person making charge)	(Print/type name and title or office, if any)	
(b) (6), (b) (7)(C)		e-mail
Addres	Date 08/03/2022 11:14:21 PM	(b) (6), (b) (7)(C)
		(4) (4) (1) (6)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

8(a)(3)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) joined or

supported a labor organization and in order to discourage union activities and/or membership.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	Suspension	^{(D) (S), (D) (7)} 2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

	DO NOT WRITE IN THIS SPACE	
Case	19-CA-300786	Date Filed 8/4/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in whi	ch the alleged unfair labor practice occurred or is occurring.	
1. EMP	LOYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No. (206) 650-9807
Garden Cycles LLC		c. Cell No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	f. Fax. No.
7016 18 th Ave SW,	(b) (6), (b) (7)(C)	g. e-mail gardencycles@hotmail.com
Seattle, WA 98106-5100		h. Number of workers employed 18
i. Type of Establishment (factory, mine, wholesaler, etc.) Maintenance	j. Identify principal product or service Landscaping	,
The above-named employer has engaged in and is engaging in Labor Relations Act, and these unfair labor practices are pract commerce within the meaning of the Act and the Postal Reorg	ices affecting commerce within the meaning of the Act, or t	
 2. Basis of the Charge (set forth a clear and concise statement) Within the past six months, the Employer has violated Retaliating against (b) (6), (b) (7)(C) by reducing the Refusing to furnish information the union requirement. 	the Act by: e number of hours is assigned. the number of hours is assigned.	
3. Full name of party filing charge (if labor organization, give Laborers International Union of North (LIUNA) Local 242	full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No. (206) 442 0470
22323 Pacific Hwy S Des Moines, WA 98198		4c. Cell No.
		4d. Fax No.
		4e. e-mail jball@nwlaborers.org
5. Full name of national or international labor organization of	which it is an affiliate or constituent unit (to be filled in whe	n charge is filed by a labor organization)
Laborers International Union of North (LIUNA)		
	ARATION charge and that the statements are true edge and belief.	Tel. No. (206) 257-6011
DarforMar	Danielle Franco-Malone, Attorney	Office, if any, Cell No.
(signature of representative or person making charge) Barnard Iglitzin & Lavitt LLP	(Print/type name and title or office, if any)	Fax No. 2 (206) 378-4132
18 West Mercer St., Ste. 400 Address Seattle, WA 98119	Date 08/04/2022	e-mail franco@workerlaw.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	19-CA-300790	Date Filed 8/4/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in		eurring.
IN THE COLUMN	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Lamb Weston		b. Tel. No. (b) (6), (b) (7)(C)
		c. Cell No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	f. Fax. No. 509-736-2181
960 N. Glade Road Pasco, WA 99301	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) ₂ lambweston.com
		h. Number of workers employed 550
i. Type of Establishment (factory, mine, wholesaler, etc.) Processing Plant	j. Identify principal product or service Potatoes	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of sec	ction 8(a), subsections (1) and
(list subsections) 8(a)(1) and (5)	of the National Laboration	or Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are pra	actices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
bargaining unit employees without notice to the un	non and without providing the union an opportu	mity to bargain.
3. Full name of party filing charge (if labor organization, g Teamsters Local Union No. 839	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code David Ballew	9)	4b. Tel. No. 206-285-3610
Reid McCarthy Ballew & Leahy, LLP 100 W. Harrison Street, Suite N-300 Seattle, WA 98119		4c. Cell No.
		4d. Fax No.
		4e. e-mail david@rmbllaw.com
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be filled	l in when charge is filed by a labor organization)
declare that I have read the abo	ARATION ve charge and that the statements	Tel. No. 206-285-3610
are true to the best of n	ny knowledge and belief. David Ballew, Attorney for Local 839	Office, if any, Cell No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No. 206-285-8925
Address 100 W. Harrison St., Ste N300, Seattle, V	VA 98119 Date 08-04-22	e-mail david@rmbllaw.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-300853	8/5/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in 1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	occurring.		
a. Name of Employer		b. Tel. No.		
Kaiser Permanente of Washington		(b) (6), (b) (7)(C)		
		c. Cell No.		
		f. Fax. No.		
d. Address (Street, city, state, and ZIP code)	e. Employer Representative			
5615 W Sunset Hwy	(b) (6), (b) (7)(C)	g. e-mail		
Spokane, WA 99224		(b) (6), (b) (7)(C)@kp.org		
		h. Number of workers employed		
		3,000		
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service			
Hospital	Healthcare			
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of s	ection 8(a), subsections (1) and		
(list subsections) (5)		abor Relations Act, and these unfair labor		
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are p	practices affecting commerce within the		
meaning of the Act and the Postal Reorganization Act.				
2. Basis of the Charge (set forth a clear and concise state				
In the past six months, the employer h	, ,			
requested in order to represent its me		•		
information, beginning in late April 202	·			
requested information. Yet the Emplo	yer continues to refuse to provide t	the information.		
3. Full name of party filing charge (if labor organization, g	ive full name including local name and number)			
SEIU Healthcare 1199NW	ive full flame, including local flame and flumber)			
4a. Address (Street and number, city, state, and ZIP code	9)	4b. Tel. No.		
15 S Grady Way Suite 200		425-917-1199		
Renton, WA 98057		4c. Cell No.		
Tronien, www.		425-919-7271		
		4d. Fax No.		
		425-917-9707		
		4e. e-mail		
laurelw@seiu1199nv				
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be fill	led in when charge is filed by a labor organization)		
Service Employees International Union				
6. DECL	ARATION	Tel. No.		
I declare that I have read the above charge and that the statements		425-917-1199		
(b) (6), (b) (7)(C) are true to the best of n	Office, if any, Cell No.			
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)		
ntative or person making charge) (Print/type name and title or office, if any)		Fax No.		
		425-917-9707		
Address 15 S Grady Way Suite 200 Renton, WA 98057 Date 8/5/2022				
WILLELL FALSE STATEMENTS ON THIS CHARGE	OAN DE BUNIQUED BY FINE AND IMPRICONME	NT (II 0, 00DE TITLE 40, 0E0TION 4004)		

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	10.01.00010	Date Filed
19-CA-300940	8/5/2022	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in 1. EMPL	which the alleged unfair labor practice occurred or is or OYER AGAINST WHOM CHARGE IS BROUGHT	ccurring.
a. Name of Employer Whitman County Humane Society		b. Tel. No. (509) 332-3422 c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code) 1340 Old Moscow Road Pullman, WA 99163	e. Employer Representative (b) (6), (b) (7)(C)	g. e-mail whitmanpets.org h. Number of workers employed
i. Type of Establishment (factory, mine, wholesaler, etc.) pet shelter	j. Identify principal product or service animal services	
The above-named employer has engaged in and is engage (list subsections) practices are practices affecting commerce within the meaning the Act and the Postal Reorganization Act.	of the National La	bor Relations Act, and thest unfair labor
employees and the public in retaliation for the employees are concerted activities among the staff.		ies and/or to prevent further protected
(b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code (b) (6), (b) (7)(C)	p)	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. 4d. Fax No. 4e. e-mail (b) (6), (b) (7)(C)
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be fille	ed in when charge is filed by a labor organization)
d the abo	ARATION ve charge and that the statements hy knowledge and belief. (b) (6), (b) (7)(C), an individual	Tel. No. (b) (6), (b) (7)(C) Office, if any, Cell No.
(sigr harge)	(Print/type name and title or office, if any)	Fax No.
Address (b) (6), (b) (7)(C)	Date 8/5/22	e-mail (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS SOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Çase		Data Filed
	19-CA-300996	8/9/2022

INSTRUCTIONS:

Lite au outling Aun MEKO Rediobs) nitector tot rie tediou tu	which the slieged fight innot bigging occurred of is oc	cumng.
	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer STONEWAY CONCRETE		b. Tel. No. 206 762-9125
		c. Call No. (b) (6), (b) (7)(C)
		f. Fax. No.
d. Address (Street, city, state, and 2IP code)	e. Employer Representative	425 228-4924
9125 10th Ave. S.	(b) (6), (b) (7)(C)	g. e-mall
Seattle, WA 98101		(b) (6), (b) (7)(C) @stonewayconcrete.com
		h. Number of workers employed 57
i. Type of Establishment (factory, mine, wholeseler, etc.) Manufactures	j. Identify principal product or service Concrete	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of se	ction 8(a), subsections (1) and
(list subsections) Section 7	of the Netional Lat	bor Relations Act, and these unfair labor
practices are practices affecting commerce within the me meaning of the Act and the Poetal Reorganization Act.	aning of the Act, or these unfair labor practices are pi	ractices affecting commerce within the
Company refuses toprovide information requested		
Full name of party filling charge (if labor organization, g Teamsters Local No. 174	ive full name, including local name and number)	
		Lab Tallata
4a. Address (Street and number, city, state, and ZIP code 14675 Interurban Ave. S. # 303 Tukwiia, WA 98108)	4b. Tel. No. 206 441-6060
Tukwiis, 1772 70100		4c. Cell No. 206 948-7166
		4d. Fex No. 206 441-4853
		4e. e-mail mnewgent@teamsicre174.org
5. Full name of national or international labor organization		d in when charge is filed by a (abor organization)
International Brotherhood of Teamsters Local Uni	on No. 174	
I declare that I have read the above	ARATION ve charge and that the statements	Tel. No. 800-221-9952
are true to the best of my knowledge and belief. Marge Newgent (signeture of representative or person making charge) (Print/type name and title or office, if any) 14675 interurban Ave. S. Tukwila, Wa 98168 Address Date 8/8/2022		Office, If any, Cell No. 206 441-6060
		Fax No. 206 441-4853
		e-mail mnewgent@tcamsters174.org
	2 101 20 20 2	The second secon

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 10, GEOTIGA 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA CHAR

NAL L	ABOR RELA	ATIONS BOARD	
RGF	AGAINST	FMPI OYFR	

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-301021	8/8/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occurri	ng.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Aston Carter / Nintendo		(b) (6), (b) (7)(C)
		c. Cell No.
		f. Fax. No.
		4
d. Address (Street, city, state, and ZIP code) 4900 150th Ave NE	e. Employer Representative	g. e-mail
4900 TSUIT AVE NE	(b) (6), (b) (7)(C)	g. C-maii
		^{(b) (6), (b) (7)(} @noa.nintendo.com
WA Redmond 98052		h. Number of workers employed
		50
i. Type of Establishment (factory, mine, wholesaler, etc.)	i Identify principal product or service	
Software & Programming	Video game software development	
		2()
The above-named employer has engaged in and is engaged		
(list subsections) 1		Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are practi	ses affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor pra	ctices)
See additional page		
(b) (6), (b) (7)(C) of party filing charge (if labor organization, g	rive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP cod	e)	4b. Tel. No.
		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c. Cell No.
		4d. Fax No.
		1
		4e. e-mail
		(b) (6), (b) (7)(C)
F. F. III. a constant of a stick of a constant of a stick of a sti	and the later an	
5. Full name of national or international labor organizatio	not which it is an animate of constituent unit (to be tilled in t	vnen charge is filed by a labor organization)
6. DECL	ARATION	Tel. No.
	ove charge and that the statements	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) are true to the best of n	ny knowledge and belief.	
(b) (c), (b) (7)(c) Office, if any, Cell No.		
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
(b) (6), (b) (7)(C)		
	Date 08/07/2022 12:37:51 PM	e-mail
Address	Date Optivizing 15:01:011 M	(b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

8(a)(1)

Within the previous six months, the Employer discharged an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee discharged	Approximate date of discharge
(b) (6), (b) (7)(C)	(b) (6), (b) (7)/2022

8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights protected by Section 7 of the Act by maintaining work rules that prohibit employees from discussing wages, hours, or other terms or conditions of employment.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	19-CA-301034	Date Filed 8/9/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occ	urring.	
	OYER AGAINST WHOM CHARGE IS BROUGHT		
a. Name of Employer		b. Tel. No. 425 266 1000	
Stoneway Concrete		c. Cell No.	
		f. Fax. No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative		
9125 10 th Avenue S Seattle, WA 98108	(b) (6), (b) (7)(C)	g. e-mail (b) (b) (ர)(c) @stonewayconcrete.com	
		h. Number of workers employed 39	
i. Type of Establishment (factory, mine, wholesaler, etc.) Construction—Supplies and Fixtures	j. Identify principal product or service Concrete		
The above-named employer has engaged in and is engage National Labor Relations Act, and these unfair labor pract are practices affecting commerce within the meaning of the second secon	ices are practices affecting commerce within the mear		
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the last six months, and specifically since approximately March 24, 2022, the Employer has violated the Act by, among other things, engaging in surveillance of employees engaged in protected activities and by retaliating against an employee who was engaged in protected activity due to their protected activity.			
3. Full name of party filing charge (if labor organization, gi General Teamsters Local Union #174	ive full name, including local name and number)		
4a. Address (Street and number, city, state, and ZIP code	9)	4b. Tel. No. 206 441 7470	
14675 Interurban Ave S Tukwila, WA 98168		4c. Cell No.	
		4d. Fax No.	
		4e. e-mail	
5. Full name of national or international labor organization International Brotherhood of Teamsters	of which it is an affiliate or constituent unit (to be filled	in when charge is filed by a labor organization)	
I declare that I have read the abo	ARATION ve charge and that the statements	Tel. No. 206 257 6012	
are true to the best of my knowledge and belief.		Office, if any, Cell No.	
(signature of representative or person making charge) Gabe Frumkin, Attorney (Print/type name and title or office, if any)		Fax No. 206 378 4132	
Barnard Iglitzin & Lavitt LLP 18 West Mercer St., Ste. 400 Address Seattle, WA 98119	08/09/2022 Date	e-mail Frumkin@workerlaw.com	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-301067	8/9/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

File all original with NERB Regional Director for the region in	which the aneged umair labor practice occurred or is occurrii	19.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
MultiCare - Capital Medical Center		(b) (6), (b) (7)(C)
That out of out the state of the		
		c. Cell No.
		f. Fax. No.
		1.1 4.1.110.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
3900 Capital Mall Dr. SW	(b) (6), (b) (7)(C)	g. e-mail
'		
		(b) (6), (b) (7)(C) @multicare.org
WA Olympia 98502		h Number of workers employed
		h. Number of workers employed
		2059
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Healthcare	Healthcare	
The above-named employer has engaged in and is enga	ging in unfair labor practices within the meaning of section	8(a), subsections (1) and
(list subsections) 1	of the National Labor R	elations Act, and these unfair labor
nractices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are practic	res affecting commerce within the
	arming or the Aot, or those armain labor practices are practic	as an early commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor prac	ctices)
See additional page		
3. Full name of party filing charge <i>(if labor organization, g</i> Daniel Cobb	rive full name, including local name and number)	
United Food and Commercial Workers Union Local 3000	1	4b. Tel. No.
4a. Address (Street and number, city, state, and ZIP cod	e <i>)</i>	4b. Tel. No.
		(206) 436-0210
		4c. Cell No.
5030 1st Ave South		
WA Seattle 98134		
		4d. Fax No.
		A
		4e. e-mail
		dcobb@ufcw3000.org
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit /to be filled in w	then charge is filed by a labor organization
o. i dii namo oi nationaroi internationanasoi organizatio	The which the all all mate of constituent and the med in w	Then energe is flice by a labor organization,
	ARATION	Tel. No.
	ove charge and that the statements	(253) 528-0278
are true to the best of n	ny knowledge and belief.	Office if any Call No
6 St	A anan Chraam.	Office, if any, Cell No.
/	Aaron Streepy	
(signature of representative or person making charge)	Attorney (Print/type name and title or office, if any)	Fax No.
(signature of representative or person making charge)	(глиилуре патне аполиве от отпсе, и апу)	
4218 227th Ave Ct. East		
	D 4 00/00/0000 00:05:40 PM	e-mail
Address Buckley WA 98321	Date 08/09/2022 02:05:19 PM	aaron@streepylaw.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights

protected by Section 7 of the Act by interrogating employees about their union activities.

Name of Employer's Agent/Representative who made the statement	Approximate date
(b) (6), (b) (7)(C)	07/14/2022
(b) (6), (b) (7)(C)	07/14/2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	19-CA-301067	Date Filed 9/20/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
MultiCare - Capital Medical Center		(b) (6), (b) (7)(C)
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
3900 Capital Mall Dr. SW Olympia, WA 98502	(b) (6), (b) (7)(C)	g. e-mail (b) (6), (b) (7)(C) @multicare. o
		h. Number of workers employed 2059
i. Type of Establishment (factory, mine, wholesaler, etc.) Healthcare	j. Identify principal product or service Healthcare	
The above-named employer has engaged in and is engaged	ing in unfair labor practices within the meaning of sec	ction 8(a), subsections (1) and
(list subsections) 1	of the National Lab	oor Relations Act, and these unfair labor
practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor practices are pr	actices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor	practices)
Within the previous six-months, the Employer has protected by Section 7 of the Act by interrogating coerced an employee by stating that going was inappropriate and that the Union can't make m	employees about their union activities. Manage to the Union was not the appropriate way to ha	ment (b) (6), (b) (7)(C) and (b) (6), (b) (7)(C) and (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d
3. Full name of party filing charge (if labor organization, ga	ive full name, including local name and number)	
United Food and Commercial Workers Union, Loc	al 3000	
4a. Address (Street and number, city, state, and ZIP code)	4b. Tel. No.
5030 1st Ave South		206 436 0210
Seattle, WA 98134		4c. Cell No.
		4d. Fax No.
		4e. e-mail dcobb@ufcw3000.org
5. Full name of national or international labor organization	of which it is an affiliate or constituent unit (to be filled	d in when charge is filed by a labor organization)
United Food and Commercial Workers Internation	al Union	
6. DECL/	ARATION	Tel. No.
	ve charge and that the statements	253-528-0278
are true to the best in	y knowledge and belief. Aaron Streepy, Attorney	Office, if any, Cell No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
Address 4218 227th Ave Court East, Buckley, W.A.	A 98321 Date 9-20-22	e-mail aaron@streepylaw.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
19-CA-301073	8/9/2022	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

File an original with NERB Regional Director for the region in	which the aneged diffair rabor practice occurred or is occur	ilig.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Multicare - Capital Medical Center		(b) (6), (b) (7)(C)
		c. Cell No.
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	-
3900 Capital Mall Dr SW		g. e-mail
ooo oupital Mail Br ovv	(b) (6), (b) (7)(C)	
		(b) (6), (b) (7)(C)@multicare.org
WA Olympia 98502		h. Number of workers employed
		2059
		2039
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Healthcare	Healthcare	
The above-named employer has engaged in and is enga	ging in unfair labor practices within the meaning of section	n8(a), subsections (1) and
(list subsections) 1	of the National Labor	Relations Act, and these unfair labor
practices are practices affecting commerce within the me		
	aning of the Act, of these unian labor practices are pract	ices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor pr	actices)
See additional page		
See additional page		
3. Full name of party filing charge <i>(if labor organization, g</i> Daniel Cobb	rive full name, including local name and number)	
United Food and Commercial Workers Union Local 3000		
4a. Address (Street and number, city, state, and ZIP cod		4b. Tel. No.
		(206) 436-0210
		4c. Cell No.
5030 First Ave South Suite 200		4C. Cell No.
WA Seattle 98134		
		4d. Fax No.
		4e. e-mail
		dcobb@ufcw3000.org
	C. I. I. I. I. I. C.	g v
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit (to be filled in	when charge is filed by a labor organization)
	ARATION	Tel. No.
	ove charge and that the statements ny knowledge and belief.	(253) 528-0278
are true to trie pest of ri	iy kilowledge alid beller.	Office, if any, Cell No.
R St	Aaron Streepy	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Attorney	Faulta
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
4218 227th Ave Ct East		
Address Buckley WA 98321	Date 08/09/2022 02:11:07 PM	e-mail
Address Duckley WA 30021	Date 00/09/2022 02.11.07 FW	aaron@streepylaw.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights protected by Section 7 of the Act by denying an employee's request for union representation during an disciplinary investigation.

Approximate date representation was denied

(b) (6), (b) (7<mark>/2022</mark>

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date F ed
	19-CA-301073	9/20/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

rile an original with NERB Regional Director for the region in	which the alleged unian labor practice occurred or is occu	arring.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Emp oyer		b. Te . No.
MultiCare - Capital Medical Center		(b) (6), (b) (7)(C)
		c. Ce No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Emp oyer Representat ve	g o ma
3900 Capital Mall Dr. SW	(b) (6), (b) (7)(C)	g. e-ma
Olympia, WA 98502		(b) (6), (b) (7)(C) @multicare.o
		h. Number of workers emp oyed
		2059
Type of Estab abmont //	: Identify prine no product or convec	2033
. Type of Estab shment (factory, mine, wholesaler, etc.)	j. Ident fy pr nc pa product or serv ce	
Healthcare	Healthcare	
The above-named employer has engaged in and is engaged		
(list subsections) 1, 3	of the National Labo	r Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are pra	ctices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Bas s of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	practices)
Within the previous six-months, the Employer has	interfered with, restrained, and coerced its empl	oyees in the exercise of rights
protected by Section 7 of the Act by denying an en		
Employer retaliated and discriminated against the	Employee for protected concerted Union activity	(including raising safety concerns) by
extending probationary period and by assigning	more arduous tasks.	
3. Fu name of party f ng charge (if labor organization, g	ive full name, including local name and number)	
United Food and Commercial Workers Union, Loc	cal 3000	
4a. Address (Street and number, city, state, and ZIP code	e)	4b. Te . No.
5030 1st Ave South		206 436 0210
Seattle, WA 98134		4c. Ce No.
		40. 00 No.
		dd Fan Na
		4d. Fax No.
		4e. e-ma
		dcobb@ufcw3000.org
5. Fu name of nat ona or nternat ona abor organ zat or	n of which it is an aff ate or constituent unit (to be filled	in when charge is filed by a labor organization)
United Food and Commercial Workers Internation	al Union	
Officed Food and Commercial Workers internation	ai Olion	
6. DECL	ARATION	Te . No.
	ve charge and that the statements	253-528-0278
are true to the best of n	ny knowledge and belief.	Office, flany, Ce No.
	Aaron Streepy, Attorney	
(signature of representative or person making charge)	(Print/type name and title or office if any)	Fax No.
, , , , , , , , , , , , , , , , , , , ,	, ,,	Tuk Ito.
4218 227th Ave Court East, Buckley, WA	A 08321	o mo
Address	9-20-22 Date	e-ma
		aaron@streepylaw.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	19-CA-301179	Date Filed 8/11/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occurring	ıg.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Starbucks Corporation		(206) 318-2212
Starbucks Corporation		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	1
2401 Utah Avenue, Suite 800	Howard Schultz, CEO	g. e-mail
Seattle, WA 98134		hschultz@starbucks.com
2344 Eastlake Ave E		
Seattle WA, 98102		h. Number of workers employed 15
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Coffee Shop	Food and Beverage	
The above-named employer has engaged in and is engage National Labor Relations Act, and these unfair labor pract are practices affecting commerce within the meaning of the	ging in unfair labor practices within the meaning of section ices are practices affecting commerce within the meaning lee Act and the Postal Reorganization Act.	8(a), subsections (1) and (5) of the of the Act, or these unfair labor practices
2. Basis of the Charge (set forth a clear and concise state	ment of the facts constituting the alleged unfair labor prac	tices)
Within the past six months the Employer h	_	•
away union pins and materials and instruct	•	•
including in break areas, in violation of est	ablished past practice, without bargaining	with the Union.
3. Full name of party filing charge (if labor organization, g	ive full name, including local name and number)	
Workers United	, ,	
4a. Address (Street and number, city, state, and ZIP code	9)	4b. Tel. No.
		(646) 448-6414
Workers United		4c. Cell No.
22 South 22 nd St		
Philadelphia, PA 19103		4d. Fax No.
		(215) 575-9065
		4e. e-mail
	rminter@pjbwu.org	
5. Full name of national or international labor organization	of which it is an affiliate or constituent unit (to be filled in w	hen charge is filed by a labor organization)
Service Employees International Union		
	ARATION	Tel. No.
	ve charge and that the statements by knowledge and belief.	(206) 257-6001
1///2	Office, if any, Cell No.	
Marina Multhaup, Attorney		
(signature of representative or person making charge) (Print/type name and title or office, if any)		Fax No.
Barnard Iglitzin & Lavitt LLP		(206) 378-4132
18 West Mercer St., Ste. 400 Address Seattle, WA 98119	Date 08/11/2022	e-mail
		multhaup@workerlaw.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD AMENDED CHARGE AGAINST **EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-301179	10/17/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.			
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer		b. Tel. No.	
Starbucks Corporation		(206) 318-2212	
		c. Cell No.	
		f. Fax. No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	1	
2401 Utah Avenue, Suite 800	Howard Schultz, CEO	g. e-mail	
Seattle, WA 98134		hschultz@starbucks.com	
2344 Eastlake Ave E			
Seattle WA, 98102		h. Number of workers employed 15	
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	13	
Coffee Shop	Food and Beverage		
	ging in unfair labor practices within the meaning of section is	8(a), subsections (1) of the National	
Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the A	practices affecting commerce within the meaning of the Ac	t, or these unfair labor practices are	
2. Basis of the Charge (set forth a clear and concise state	ment of the facts constituting the alleged unfair labor pract	ices)	
Within the past six months the Employer h	_		
union pins and materials, instructing worke	-	-	
in breaks areas, and instructing workers tha	at they cannot distribute union materials at a	any time in the store.	
3. Full name of party filing charge (if labor organization, gi	ive full name, including local name and number)		
Workers United	,		
4a. Address (Street and number, city, state, and ZIP code	9)	4b. Tel. No.	
		(646) 448-6414	
Workers United		4c. Cell No.	
22 South 22 nd St			
Philadelphia, PA 19103		4d. Fax No.	
		(215) 575-9065	
		4e. e-mail	
		rminter@pjbwu.org	
5. Full name of national or international labor organization	of which it is an affiliate or constituent unit (to be filled in wi	hen charge is filed by a labor organization)	
Service Employees International Union			
1 7	ARATION	Tel. No.	
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Marina Multhaup, Attorney		(206) 257-6001	
		Office, if any, Cell No.	
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.	
Ramard Iditzin & Lovitt II D		(206) 378-4132	
Barnard Iglitzin & Lavitt LLP 18 West Mercer St., Ste. 400		e-mail	
Address <u>Seattle, WA 98119</u> Date <u>10/17/2022</u>		multhaup@workerlaw.com	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-301194	8/11/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.			
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer Cornish College of the Arts		b. Tel. No. (b) (6), (b) (7)(C)	
		c. Cell No.	
Address (Observation and 710 ands)	a Employer Depresentative	f. Fax. No.	
d. Address (Street, city, state, and ZIP code) 1000 Lenora St. Seattle, WA 98121	e. Employer Representative (b) (6), (b) (7)(C)	g. e-mail ^{நடிக்குர்குக்} @cornish.edu	
		h. Number of workers employed 11	
i. Type of Establishment (factory, mine, wholesaler, etc.) College	j. Identify principal product or service Education		
	ging in unfair labor practices within the meaning of section ices are practices affecting commerce within the meaning ne Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ment of the facts constituting the alleged unfair labor pract	ices)	
Within the last six months, and ongoing, the Employer has refused and is refusing to bargain in good faith with the Union by refusing to meet or to negotiate with the Union, and/or by placing unlawful preconditions on the recommencement of negotiations.			
3. Full name of party filing charge (if labor organization, guarantee of Theatrical Stage Emp			
4a. Address (Street and number, city, state, and ZIP code	-	4b. Tel. No.	
	<i>'</i>)	206-441-1515	
5030 1 st Ave S, Suite 204 Seattle, WA 98134		4c. Cell No.	
		4d. Fax No.	
		4e. e-mail	
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts			
I declare that I have read the abo	ARATION ve charge and that the statements	Tel. No. 206-257-6021	
are true to the best of my knowledge and belief. Sarah Derry, Attorney		Office, if any, Cell No.	
(signature of representative or person making charge) Barnard Iglitzin & Lavitt LLP 18 West Mercer St., Ste. 400 Address Seattle, WA 98119 Date 08/11/2022		Fax No. 206-378-4132	
		e-mail derry@workerlaw.com	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
	Date Filed	
19-CA-301316	8/12/2022	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	y.
a. Name of Employer		b. Tel. No.
ProMedica Senior Care (formerly HCR manor care)		(b) (6), (b) (7)(C)
, , ,		c. Cell No.
		C. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
2811 NE 139th St	(b) (6), (b) (7)(C)	g. e-mail
		(b) (6), (b) (7)(C) promedica.org
WA Vancouver 98686		h. Number of workers employed
		50
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Healthcare Facilities	Short & Long-Term Individualized Health Services	
The above named employer has engaged in and is enga	ging in unfair labor practices within the meaning of section	8/a) subsections (1) and
(list subsections) 1		Relations Act, and these unfair labor
	aning of the Act, or these unfair labor practices are practic	· · · · · · · · · · · · · · · · · · ·
meaning of the Act and the Postal Reorganization Act.	aning of the Act, of these unial labor practices are practic	tes anecung commerce within the
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor pra-	ctices)
See additional page		
page		
(b) (6), (b) (7)(C) f party filing charge (if labor organization, g	give full name, including local name and number)	
778		Ab Tal Na
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No.
		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		4c. Cell No.
		4d. Fax No.
		4e. e-mail
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit /te he filled in a	
3. Full flatile of flational of international labor organizatio	The which it is all allimate of constituent unit (to be fined in v	when charge is filed by a labor organization)
6 DECL	ARATION	Tel. No.
I declare that I have read the above charge and that the statements		(b) (6), (b) (7)(C)
are true to the best of my knowledge and belief.		
(b) (6), (b) (7)(C)		Office, if any, Cell No.
	(0),(0),(0),(0)	
(Signature of representative or person making charge) (Print/type name and title or office, if any)		Fax No.
(b) (6), (b) (7)(C)		
		e-mail
Addross		
Address	Date 08/12/2022 06:30:52 PM	(b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

8(a)(1)

Within the previous six months, the Employer discharged an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee discharged	Approximate date of discharge
(b) (6), (b) (7)(C)	(D) (E) (D) (7) /2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-301318	8/15/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in			
International Contraction of the	OYER AGAINST WHOM CHARGE IS BROUG		
a. Name of Employer Covington Post Office		b. Tel. No. 253-639-6833	
		c. Cell No. (b) (6), (b) (7)(C)	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	f. Fax. No. unknown	
17300 SE 270 PL Covington, WA 98042	(b) (6), (b) (7)(C)	g. e-mail (b) (6), (b) (7)(C)@usps.gov	
		h, Number of workers employed 50	
i. Type of Establishment (factory, mine, wholesaler, etc.) Government	j. Identify principal product or service U S P S Mail facility		
The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.			
2. Basis of the Charge (set forth a clear and concise state Management has agreed to furnish information in a Union has requested that information several times amount of harm done to City Carriers at this station These include; Clockrings for City Carriers going a grievances without the Employer meeting with Un	a grievance settlement on the hours that a s since the settlement. This information is n. Union has also requested information rover work-hour limits, rosters of employe	Rural Carrier is working in the City Craft. needed for the collective bargaining and the required for the processing of grievances.	
3. Full name of party filing charge (if labor organization, gi National Association of Letter Carriers, Branch 20)	
4a. Address (Street and number, city, state, and ZIP code) P O Box 5575 Kent, WA 98064		4b. Tel. No. none	
		4c. Cell No. (b) (6), (b) (7)(C)	
		4d. Fax No. none	
		4e. e-mail Branch2038@gmail.com	
5. Full name of national or international labor organization	of which it is an affiliate or constituent unit (to b	ne filled in when charge is filed by a labor organization)	
National Association of Letter Carriers, Kent Bran	ch 2038		
6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Signature or representative or person making charge) (Print/type name and title or office, if any)		Tel. No. (b) (6), (b) (7)(C) Office, if any, Cell No.	
		none	
(b) (6), (b) (7)(C) Address 08/15/2022 e-mail		e-mail	
Address ate		(b) (6), (b) (7)(C)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Address

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD AMENDED CHARGE AGAINST

DO NOT WRITE IN THIS SPACE		
Case	19-CA-301318	Date Filed 8/23/2022

e-mail

(b) (6), (b) (7)(C)

EMPLOYER		19-CA-301318	8/23/2022
INSTRUCTIONS:			
File an original with NLRB Regional Director for the region in	OYER AGAINST WHOM CHARGE I		
a. Name of Employer		b. Tel. No.	
Covington Post Office		253-639-683	3
		c. Cell No.	
		(b) (6), (b) (7)(C	5)
		f. Fax. No.	
		unknown	
d. Address (Street. city, state, and ZIP code) 17300 SE 270 PL	e. Employer Representative (b) (6), (b) (7)(C)	g. e-mail	
Covington, WA 98042		(b) (6), (b) (7)(C) _{@usps.gov}
l state of the sta		(=) (=), (=) (A - / Wusps.gov
			workers employed
		50	
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	е	
Government	USPS Mail facility		
The above-named employer has engaged in and is engage	ging in unfair labor practices within the	e meaning of section 8(a), subsections	(1) and
(list subsections) (A) 5		the National Labor Relations Act, and	
practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor	practices are practices affecting comm	nerce within the
meaning of the Act and the Postal Reorganization Act.			
2. Basis of the Charge (set forth a clear and concise state		-	
Management has agreed to furnish information in a Union has requested that information several times			
amount of harm done to City Carriers at this station			
These include; Clockrings for City Carriers going	over work-hour limit	Unio	n has had to process
grievances without the Employer meeting with Un MULTIPLE TIMES INFORMATION A	ion Representatives (D) (O),		AS REQUESTED
MULTIPLE TIMES INFORMATION A	AND TIME.	Received Fither.	
3. Full name of party filing charge (if labor organization, gi	ive full name, including local name an	nd number)	
National Association of Letter Carriers, Branch 20	38		
4a. Address (Street and number, city, state, and ZIP code	9)	4b. Tel. No.	
P O Box 5575		none	
Kent, WA 98064		4c. Cell No.	_
		(b) (6), (b) (7)(C)
		4d. Fax No.	
		none	
		4e. e-mail	
		Branch2038@	gmail.com
5. Full name of national or international labor organization	of which it is an affiliate or constituer	nt unit (to be filled in when charge is filed	i by a labor organization)
National Association of Letter Carriers, Kent Bran	ch 2038		
6. DECLA	ARATION	Tel. No.	
I declare that I have read the above charge and that the statements		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C	Office, if any, (Cell No.
		none	
n making charge)	(Print/type name and title or o	office, if any) Fax No.	
(/L) (0) (L) (7)(0)		none	
(b) (6), (b) (7)(C)	0010011	e-mail	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Date 08/23/2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
19-CA-301456	8/15/2022	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.			
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer Gary Merlino Construction		b. Tel. No. (b) (6), (b) (7)(C)	
		c. Cell No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	f. Fax. No. 206-763-4178	
9125 10 th Ave S Seattle, WA 98108	(b) (6), (b) (7)(C)	g. e-mail (b) (b) (7)(c) @gmccinc.com	
		h. Number of workers employed 34	
i. Type of Establishment (factory, mine, wholesaler, etc.) Construction	j. Identify principal product or service Trucking		
and (5) of the National Labor Relations Act, and the or these unfair labor practices are practices affecting 2. Basis of the Charge (set forth a clear and concise state	g commerce within the meaning of the Act and the	Postal Reorganization Act.	
Within the last six months, the Employer has violated the Act by, among other things, assigning bargaining unit work to employees not in the bargaining unit without giving the Union the opportunity to bargain.			
3. Full name of party filing charge (if labor organization, gammaters Local 174	ive full name, including local name and number)		
4a. Address (Street and number, city, state, and ZIP code	e)	4b. Tel. No. 206-441-6060	
14675 Interurban Ave S, Suite 303 Tukwila, WA 98059		4c. Cell No.	
		4d. Fax No. 206-441-4853	
		4e. e-mail	
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters			
I declare that I have read the about	ARATION ve charge and that the statements by knowledge and belief.	Tel. No. 206-257-6012	
Halid Zuh	Gabe Frumkin, Attorney	Office, if any, Cell No.	
(signature of representative or person making charge) Barnard Iglitzin & Lavitt LLP	(Print/type name and title or office, if any)	Fax No. 206-378-4132	
18 West Mercer St., Ste. 400 Address Seattle, WA 98119	Date <u>08/15/2022</u>	e-mail frumkin@workerlaw.com	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

^{Case} 19-CA-301541

DO NOT WRITE IN THIS SPACE
CA-301541

Date Filed
8/17/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.			
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer		b. Tel. No.	
Discovery Health MD		(253) 342-1088	
		c. Cell No.	
		f. Fax. No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	1	
13075 Gateway Dr S	(b) (6). (b) (7)(C)	g. e-mail	
		NOVALIDITATE OF THE PROPERTY O	
WA Seattle 98168		(b)(6),(b)(7)(c) @discoveryheal hmd.com	
WA deathe 30100		h. Number of workers employed	
		16	
i. Type of Establishment (factory, mine, wholesaler, etc.)			
lealthcare Mobile Vaccinations (COVID19)			
The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and			
(list subsections) 1 of the National Labor Relations Act, and these unfair labor			
	aning of the Act, or these unfair labor practices are practic	es affecting commerce within the	
meaning of the Act and the Postal Reorganization Act.			
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)			
See additional page			
1 3			
narty filing charge (if labor organization of	ive full name, including local name and number)		
(b) (6), (b) (7)(C) party lilling charge (ii labor organization, g	To taminatio, including local name analysis		
As Address (Street and number sity state and 7/P ands)		4b. Tel. No.	
4a. Address (Street and number, city, state, and ZIP code)		(b) (6), (b) (7)(C)	
		4c. Cell No.	
(b) (6), (b) (7)(C)		40. Gell No.	
		4d Faulla	
		4d. Fax No.	
		4	
		4e. e-mail (b) (6), (b) (7)(C)	
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit <i>(to be filled in w</i>	hen charge is filed by a labor organization)	
6. DECLA	ARATION	Tel. No.	
	ve charge and that the statements	(b) (6), (b) (7)(C)	
(b) (6), (b) (7)(C) are true to the best of m	y knowledge and belief.	Office, if any, Cell No.	
(b) (6), (b) (7)(C)			
		Fax No.	
entative or person making charge)	(Print/type name and title or office, if any)	I GA INO.	
(b) (6), (b) (7)(C)			
Address	Date 08/17/2022 09:26:37 AM	e-mail (b) (6), (b) (7)(C)	
		(0) (0), (0) (1)(0)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

8(a)(1)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees

Name of employee disciplined/retaliated	Type of discipline/retaliation	Approximate date of
against		discipline/retaliation
(b) (6), (b) (7)(C)	Termination	^{(b) (5), (b) (7} /2022
(b) (6), (b) (7)(C)	Termination	(D) (E), (D) (7)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **AMENDED CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case		Date F ed
19-CA-301541	+	9/15/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in		ing.
	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Emp oyer Discovery Health MD		b. Te . No. 253-342-1088
		c. Ce No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Emp oyer Representat ve	g. e-ma
13075 Gateway Dr. S Seattle, WA 98168	(b) (6), (b) (7)(C)	(b) (6). (b) (7)(C) @discoveryhealthn
		h. Number of workers emp oyed 16
. Type of Estab shment <i>(factory, mine, wholesaler, etc.)</i> Healthcare	j. Ident fy pr nc pa product or serv ce Mobile Vaccinations	
The above-named employer has engaged in and is engage	ging in unfair labor practices within the meaning of section	n 8(a), subsections (1) and
(list subsections) $8(a)(1)$	of the National Labor F	Relations Act, and these unfair labor
practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	aning of the Act, or these unfair labor practices are practi	ces affecting commerce within the
On or about (b) (6) (c) (7)(C) 2022, the above-named Empengaged in protected concerted activities by bringing in order to discourage employees from engaging in On or about (b) (6) (b) (7)(C) 2022, the above-named Empengaged in protected concerted activities by bringing employees from engaging in protected concerted activities activities by bringing employees from engaging in protected concerted activities activities activities by bringing employees from engaging in protected concerted activities activ	ployer terminated employees (b) (6), (b) (7)(C) and (ng concerns about working conditions to upper materials)	b) (6), (b) (7)(C) because they
3. Fu name of party f ng charge (if labor organization, g. (b) (6), (b) (7)(C)		
4a. Address (Street and number, city, state, and ZIP code (b) (6), (b) (7)(C)	2)	4b. Te . No. (b) (6), (b) (7)(C)
		4c. Ce No.
		4d. Fax No.
		4e. e-ma (b) (6), (b) (7)(C)
5. Fu name of national or international abor organization	of wh ch t s an aff ate or const tuent un t (to be filled in	when charge is filed by a labor organization)
	ARATION ve charge and that the statements	Te . No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) to the best of m	ny knowledge and belief. (b) (6), (b) (7)(C)	Office, fany, Ce No.
(signature of reasonable aking charge)	(Print/type name and title or office if any)	Fax No.
Address (b) (6), (b) (7)(C)	Date September 15, 2022	e-ma (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

(b) (6), (b) (7)(C), and (b) (6), (b) (7)(C)

DO NOT WRITE IN THIS SPACE

Case Date Filed

19-CA-301558 8/17/2022

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring.

a. Name of Employer		b. Tel. No. (b) (6), (b) (7)(C)
DARIGOLD - Production		c. Cell No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	f. Fax No.
	(b) (6), (b) (7)(C)	g. e-Mail
5601 6th Ave S., Suite 300 WSeattle, WA 98108		(b) (6), (b) (7)(C) @darigold.com
		h. Dispute Location (City and State)
		Seattle, WA
 Type of Establishment (factory, nursing home, 	j. Principal Product or Service	k. Number of workers at dispute location
hotel) Food Processing	Dairy	189
	I is engaging in unfair labor practices within the mean	
the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)		
2. Dubis of the offunge (set forth a clear and conci.	se statement of the racts constituting the alleged unit	all labor practices;
The Employer violated the Act when it refused t	to provide information to the Union relevant to its d	luties as the exclusive hargaining representative

including processing active grievances. The Union requested the information on or about the following dates: (b) (6), (b) (7)(C)

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

Full name of party filing charge (if labor organization, give full name, including local name and number)		
Fallon Schumsky, Staff Attorney		
Teamsters Local Union No. 117		
4a. Address (street and number, city, state, and ZIP code)	4b. Tel. No.	
	(206) 441-4860	
14675 Interurban Ave. Ste. 307	4c. Cell No.	
Tukwila, WA 98168		
Tukwila, WA 30100	4d. Fax No.	
	4e. e-Mail	
	fallon.schumsky@teamsters117.org	
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor		
organization)		
INTERNATIONAL BROTHERHOOD OF TEAMSTERS		
6. DECLARATION	Tel. No.	
I declare that I have read the above charge and that the statements are true to the best of	(206) 441-4860	
m knowled e and belief.		
	Office, if any, Cell No.	
By: \ all n Sahumalay Staff Attornay		
Fallon Schumsky, Staff Attorney		
(signature of representative or person making charge) Print Name and Title	Fax No.	
Address: 14675 Interurban Ave. Ste 307 Date: August 17, 2022	e-Mail	
Tukwila, WA 98168	fallon.schumsky@teamsters117.org	
,		

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-301584	8/17/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.			
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer Catapult NW		b. Tel. No. 206-649-5224	
		c. Cell No.	
	I e	f. Fax. No.	
d. Address (Street, city, state, and ZIP code) 3405 Lind Ave SW Renton, WA 98057	(b) (6), (b) (7)(C)	g. e-mail support@catapultnw.com	
		h. Number of workers employed Approx 25	
i. Type of Establishment (factory, mine, wholesaler, etc.) warehouse	j. Identify principal product or service food distribution		
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of section	8(a), subsections (1) and	
(list subsections)	of the National Labor Re	elations Act, and these unfair labor	
practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor practices are practice	es affecting commerce within the	
meaning of the Act and the Postal Reorganization Act.			
Basis of the Charge (set forth a clear and concise state)	ement of the facts constituting the alleged unfair labor pract	tices)	
During the last six months, the above-named employer interfered with, restrained and coerced employees engaged in the exercise of Section 7 rights by surveilling and creating the impression of surveillance of such employees.			
3. Full name of party filing charge (if labor organization, g UNITE HERE Local 8	ive full name, including local name and number)		
4a. Address (Street and number, city, state, and ZIP code 19415 International Boulevard, Suite 313 SeaTac, WA 98188	e)	4b. Tel. No. 206-728-2326	
Scarac, WA 70100		4c. Cell No.	
		4d. Fax No. 206-728-9772	
		4e. e-mail	
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) UNITE HERE International Union			
I declare that I have read the abo	ARATION ve charge and that the statements ny knowledge and belief.	Tel. No. 415-597-7200	
Lio and to the best of the	Kristin L. Martin, Attorney	Office, if any, Cell No.	
(signature of representative or person making charge) McCracken, Stemerman & Holsberr	(Print/type name and title or office, if any) y, LLP	Fax No. 415-597-7201	
475 14th Street, Suite 1200 Address Oakland, CA 94612	Date August 17, 2022	e-mail klm@msh.law	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

Case	
19-CA-301585)

DO NOT WRITE IN THIS SPACE Date Filed 8/17/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is oc	curring.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Peace Health South West		(360) 514-2000
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	a a mail
400 NE Mother Joseph Pl	(b) (6), (b) (7)(C)	g. e-mail
		(b) (6). (b) (7) @peacehealth.org
WA Vancouver 98664		h. Number of workers employed 1300
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	-
Healthcare	Providing Healthcare	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of se	ction 8(a), subsections (1) and
(list subsections) 1	of the National La	bor Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are p	ractices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labo	r practices)
See additional page		
3. Full name of party filing charge (if labor organization, g	ive full name, including local name and number)	
Jacob L Faatz Oregon Federation of Nurses and Health Professionals	,	
4a. Address (Street and number, city, state, and ZIP cod		4b. Tel. No.
	-,	(503) 791-9422
		4c. Cell No.
11560 SW 67th		1.57.00
OR Tigard 97223		4d. Fax No.
		44.1 dx 140.
		4e. e-mail
		jfaatz@ofnhp.org
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit /to be fille	
3.1 dii fiame of fiational of international abor organizatio	To whom it is an animate of constituent unit (to be fine	u iii when charge is med by a labor organization)
AFT		
	ARATION	Tel. No.
I declare that I have read the above charge and that the statements		
are true to the best of my knowledge and belief.		Office, if any, Cell No.
(signature of representative or person making charge) (Print/type name and title or office, if any)		Fax No.
(gatano of person maning unarge)	(
Address	Date 08/17/2022 03:45:32 PM	e-mail
, radio33	Date	— I

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights protected by Section 7 of the Act by denying an employee's request for union representation during an disciplinary investigation

protected by Section 7 of the Act by denying an employee's request for union representation during an disciplinary investigation.
Approximate date representation was denied
^{9(6, (9)7)} /2022
^{9)(6), (9)(7)} /2022
⁽²⁰²² /2022
^{9)(6), (9)} (⁷)/2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

Case	
Case 19-CA-301586	

DO NOT WRITE IN THIS SPACE Date Filed 8/17/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in		ing.
	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Peace Health South West Medical Center		(800) 514-2000
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	a a mail
400 Mother Joseph PI.	(b) (6), (b) (7)(C)	g. e-mail
		(b) (6), (b) (7) @peacehealth.org
WA Vancouver 98664		h. Number of workers employed
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Healthcare	Healthcare Service	
The above-named employer has engaged in and is engaged		18(a) subsections (1) and
(list subsections) 3		Relations Act, and these unfair labor
practices are practices affecting commerce within the me		·
meaning of the Act and the Postal Reorganization Act.		oce an esting estimates within the
Basis of the Charge (set forth a clear and concise state)	ement of the facts constituting the alleged unfair labor pra	actices)
See additional page		
 Full name of party filing charge (if labor organization, g Jacob L Faatz Oregon Federation of Nurses and Health Professionals 	rive full name, including local name and number) Internal Organizer	
4a. Address (Street and number, city, state, and ZIP code	e)	4b. Tel. No.
		(503) 791-9422
44500 014 074		4c. Cell No.
11560 SW 67th OR Tigard 97223		
OK figure 07220		4d. Fax No.
		4e. e-mail
		jfaatz@ofnhp.org
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit /to be filled in	when charge is filed by a labor organization
AFT AFT		when enarge is filed by a labor organization,
I declare that I have read the abo	ARATION ove charge and that the statements	Tel. No.
are true to the best of my knowledge and belief.		Office, if any, Cell No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
Address	Date 08/17/2022 04:05:34 PM	e-mail

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

8(a)(3)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) joined or

supported a labor organization and in order to discourage union activities and/or membership.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	Not Scheduling	
(b) (6), (b) (7)(C)	Investigation and Discipline	
(b) (6), (b) (7)(C)	Investigation and Discipline	
(b) (6), (b) (7)(C)	Investigation and Discipline	
(b) (6), (b) (7)(C)	Investigation and Discipline	
(b) (6), (b) (7)(C)	Investigation and Discipline	
(b) (6), (b) (7)(C)	Investigation and Discipline	

8/17/2022 10:37 PM FROM: Staples

TO: +12062206305

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD FORM EXEMPT UNDER 44 U.S.C 3512

DO NOT WRITE IN THIS SPACE

Date Filed

14:07	Ph I	OT	-	100
INST				

INTERNET

FORM NURB-501

(2-08)

CHARGE AGAINST EMPLO	and the second s	Date Filed
STRUCTIONS:	19-	-CA-301589 8/17/2022
an original with NLRB Regional Director for the region in which	the alleged unfair labor practice occurred o	or is occurring.
	AGAINST WHOM CHARGE IS BRO	DUGHT
. Name of Employer		b. Tel. No. 425-316-3938
Starbucks Corporation		
		c. Cell No. (b) (6), (b) (7)(C)
		f. Fax No.
. Address (Street, city, state, and ZIP code)	e, Employer Representative	to the state of th
130 132nd St. SE, Mill Creek, WA 98012	(b) (6), (b) (7)(C)	g. e-Mail
	(b) (6), (b) (7)(c) & She (6) (1)(s)	h. Number of workers employed 40
Type of Establishment (factory, mine, wholesaler, etc.) Coffee Shop	J. Identify principal product or service Food and Beverage	
The above-named employer has engaged in and is engagi	ng in unfair labor practices within the mea	ning of section 8(a), subsections (1) and (list
subsections)	of the N	ational Labor Relations Act, and these unfair labor
practices are practices affecting commerce within the mea within the meaning of the Act and the Postal Reorganization	ning of the Act, or these unfair labor pract	dees are unfair practices affecting commerce
. Basis of the Charge (set forth a clear and concise stateme	ent of the facts constituting the alleged uni	air labor practices)
Within the past six months, the Employer discha		
protected and concerted activity and to discoura		
Full name of party filing charge (if labor organization, give o) (6), (b) (7)(C)	full name, including local name and numb	er)
a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No. (b) (6), (b) (7)(C)
b) (6), (b) (7)(C)		
		(5) (5), (5) (1)(5)
		4d. Fax No.
		4e. e-Mail
		(b) (6), (b) (7)(C)
. Full name of national or international labor organization organization)	f which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor
DECLARATI declare that I have read the above charge and that the statement		belief. Tel. No. (b) (6), (b) (7)(C).
(b) (6), (b) (7)(C)	(6). (b) (7)(C), Individual	Office, if any, Cell No.
naking charge)	(Print/type name and title or office, if any)	Fax No.
	1	e-Mail
(b) (6), (b) (7)(C)	5/17	(b) (6) (b) (7)(C)
idress	(da	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
	Date Filed 8/18/2022	
19-CA-301620	0/10/2022	

INSTRUCTIONS:

gional Director for the region in which t	

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occurri	ng.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No. (206) 318-2212
Starbucks Corporation		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-mail
2401 Utah Avenue, Suite 800	Howard Schultz, CEO	hschultz@starbucks.com
Seattle, WA 98134		h. Number of workers employed
		Est. 160,000
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Coffee Shop	Food and Beverage	
The above-named employer has engaged in and is engaged. National Labor Relations Act, and these unfair labor pract are practices affecting commerce within the meaning of the	ices are practices affecting commerce within the meaning	
2. Basis of the Charge (set forth a clear and concise state	ment of the facts constituting the alleged unfair labor prac	tices)
Within the last six months, and specificall	y on approximately August 8, 2022, the Er	nployer violated the Act by,
among other things, promising a grant of b	enefit to employees who are neither union	nized nor unionizing while at
the same time denying that benefit to empl	loyees who are known to be unionized or u	mionizing.
Additionally, on August 11, 2022, the Employees from engaging in common Do to the Employers' repeated and flagrant	nunications that are protected by Section 7	of the Act.
3. Full name of party filing charge (if labor organization, ga	ive full name, including local name and number)	
Workers United		
4a. Address (Street and number, city, state, and ZIP code)	4b. Tel. No.
TT 1 TT '. 1		(646) 448-6414
Workers United		4c. Cell No.
22 South 22 nd St		
Philadelphia, PA 19103		4d. Fax No.
		(215) 575-9065
		4e. e-mail
		rminter@pjbwu.org
5. Full name of national or international labor organization	of which it is an affiliate or constituent unit (to be filled in v	when charge is filed by a labor organization)
Service Employees International Union		
I declare that I have read the abo	ARATION ve charge and that the statements by knowledge and belief	Tel. No. (206) 257-6012
are true to the best of my knowledge and belief. Office		Office, if any, Cell No.
Halve Sulv	Gabe Frumkin, Attorney	Fax No.
(signature of representative or person making charge) Barnard Iglitzin & Lavitt LLP	(Print/type name and title or office, if any)	(206) 378-4132
18 West Mercer St., Ste. 400 Address Seattle, WA 98119	Date 8/18/2022	e-mail frumkin@workerlaw.com

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	19-CA-301663	Date Filed 8/18/2022

sbright@seiu925.org

INSTRUCTIONS: File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is on	courring
	LOYER AGAINST WHOM CHARGE IS BROUGHT	.curring.
a. Name of Employer		b. Tel. No.
MightyKidz		206-397-4103
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
2307 W Elmore	(b) (6), (b) (7)(C)	g. e-mail
Seattle, WA 98199		(b) (6), (b) (7)(C) @mightykidz.com
		h. Number of workers employed
		35
i. Type of Establishment (factory, mine, wholesaler, etc.) Childcare facility	j. Identify principal product or service Childcare services and early learning, after a	nd hafara school care
The above-named employer has engaged in and is enga		
(list subsections)		bor Relations Act, and these unfair labor
practices are practices affecting commerce within the me meaning of the Act and the Postal Reorganization Act.	earling of the Act, or these unfair labor practices are p	ractices affecting commerce within the
Basis of the Charge (set forth a clear and concise state)	amont of the facts constituting the alleged unfair labor	y mysetises)
On or about [6][6]/2022, the above-named employer	r terminated the following employees in retaliat	ion for their protected, concerted
activity. The employees include (b) (6). (b) (7)(C), (b)	(6), (b), (7)(C), (b), (b), (b), (b), (c), (b), (c), (c), (c), (c), (c), (c), (c), (c	(r)(c), and $(b)(c)$, $(b)(r)(c)$.
3. Full name of party filing charge (if labor organization, g	-	
Service Employees International Union Local 925	; 	
4a. Address (Street and number, city, state, and ZIP cod	e)	4b. Tel. No.
1914 N. 34th St. Suite 100		206-322-3010
Seattle, WA 98103		4c. Cell No.
		4d. Fax No.
		4e. e-mail
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be fille	d in when charge is filed by a labor organization)
Service Employees International Union		
6 DECL	ARATION	Tel. No.
	ove charge and that the statements	206-322-3010 ext 322
	ny knowledge and belief.	Office, if any, Cell No.
A PART OF THE PART	Sarah Bright, Organizing Director	253-297-9149
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
1914 N. 34th St. Ste. 100 Seattle, WA 87	7103	e-mail

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

IATIONAL LABOR RELATIONS BOARD
AMENDED
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-301663	9/9/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer MightyKidz		b. Tel. No. 206-397-4103
		c. Cell No.
d Address (Street eity etate and 7ID ends)	e Employer Representative	f. Fax. No.
d. Address (Street, city, state, and ZIP code) 2307 W Elmore Seattle, WA 98199	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) mightykidz.com
		h. Number of workers employed 35
i. Type of Establishment (factory, mine, wholesaler, etc.) Childcare facility	j. Identify principal product or service Childcare services and early learning, after and	before school care
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of secti	on 8(a), subsections (1) and
(list subsections) 8(a)(1)		Relations Act, and these unfair labor
practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor practices are prac	tices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise states On or about (b) (6), (b) (7)(C) 2022, the above-named empactivity: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) abou (b) (6), (b) (7)(C) 2022, the above-named employer concerted activity: (b) (6), (b) (7)(C) and (b) (6), (b) (7)(C)	bloyer terminated the following employees in retail (C)(C)(b)(6), (b)(7)(C)(b)(6), (b)(7)(C)(b)(6), (c)(c)(c)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)(d)	aliation for their protected, concerted and (b) (6), (b) (7)(C) on or
Full name of party filing charge (if labor organization, g. Service Employees International Union Local 925	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code 1914 N. 34th St. Suite 100 Seattle, WA 98103	2)	4b. Tel. No. 206-322-3010
Seattle, WA 96103		4c. Cell No.
		4d. Fax No.
		4e. e-mail
5. Full name of national or international labor organization Service Employees International Union	n of which it is an affiliate or constituent unit (to be filled in	n when charge is filed by a labor organization)
I declare that I have read the abo	ARATION ve charge and that the statements	Tel. No. 206-322-3010 ext 322
Sarah Bright	ny knowledge and belief. Sarah Bright, Organizing Director	Office, if any, Cell No. 253-297-9149
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
Address 1914 N. 34th St. Ste. 100 Seattle, WA 87	103 Date 9/9/2022	e-mail sbright@seiu925.org

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

SECOND AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
19-CA-301663	Date Filed 1-31-2023	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occur	urring.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer MightyKidz		b. Tel. No. 206-397-4103
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code) 2307 W Elmore Seattle, WA 98199	e. Employer Representative (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) @mightykidz.com
		h. Number of workers employed 35
i. Type of Establishment (factory, mine, wholesaler, etc.) Childcare facility	j. Identify principal product or service Childcare services and early learning, after and	before school care
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of sect	ion 8(a), subsections (1) and
(list subsections) 8(a)(1)	of the National Labo	r Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are pra-	ctices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
	(C), (b) (6). (b) (7)(C) (b) (6), (b) (7)(C), (b) (6), (b) (7)(C), (b) (6)	. (b) (7)(C), and (b) (6), (b) (7)(C).
3. Full name of party filing charge (if labor organization, g Service Employees International Union Local 925	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code 1914 N. 34th St. Suite 100	e)	4b. Tel. No. 206-322-3010
Seattle, WA 98103		4c. Cell No.
		4d. Fax No.
		4e. e-mail
5. Full name of national or international labor organization Service Employees International Union	n of which it is an affiliate or constituent unit (to be filled	in when charge is filed by a labor organization)
I declare that I have read the abo	ARATION ove charge and that the statements	Tel. No. 206-322-3010 ext 322
Sarah Bright	ny knowledge and belief. Sarah Bright, Organizing Director	Office, if any, Cell No. 253-297-9149
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
1914 N. 34th St. Suite 100	1/24/22	e-mail
Address Seattle, WA 98103	Date 1/31/23	_ sbright@seiu925.org

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE			
Case	19-CA-301717	Date Filed 8/18/2022	

INSTRUCTIONS:

1. SAME OF Employer Cascade Ambulance Cascade Ambulance Cascade Cascade Ambulance Cascade Ambulan	File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or la occurring.				
Cascade Ambulance District Color Cascade Ambulance District Color	1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT				
d. Address (Street, city, state, and ZIP code) 1482 Stater Rd Suite A Ferndale, WA 98248 (b) (6) (b) (7) (c) h. Number of workers employed 26 h. Number of workers employed 28 h. Tel. Number of workers employed 29 h. Tel. Number of workers			(b) (6), (b) (7)(C)		
d. Address (Street, city, state, and ZIP code) 1482 Stater Rd Suite A Ferndale, WA 98248 (b) (6), (b) (7) (C) 1. Number of workers employed 26 (b) (6), (b) (7) (C) 1. Number of workers employed 26 (b) (6), (b) (7) (C) 1. Number of workers employed 26 (c) 1. In Number of workers employed 26 (c) 26 (c) 27 (d) 28 (d) 38 (d)			(b) (6), (b) (7)(C)		
Litype of Establishment (factory, mine, wholesaler, etc.)	d Address (Street city state and 7IP code)				
Livype of Establishment (factory, mine, wholesaler, etc.) Ambulance Company	1482 Slater Rd Suite A	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Ambulance Company Ambulance Company Ambulance and wheelchair transportation The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (1815 subsections) 5 of the National Labor Relations Act, and these unfair labor practices are practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) On June 1, 2022, the Employer made unilateral changes to the Medical Dental and Vision plans, without prior bargaining, and is engaging in bad faith bargaining. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Heather Ewing Teamsters Local 231 4a. Address (Street and number, city, state, and ZIP code) P.O. Box H Bellingham, WA 98227 4b. Tel. No. (360) 734-7780 4c. Cell No. (360) 734-8501 4c. e-mail heather @2.3 I teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (fo be filled in when charge is filled by a labor organization) International Brotherhood of Teamsters 5. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Hather Ewing Bootest States (Printrype name and number, it and in the statements are true to the best of my knowledge and belief. (360) 319-8298 Fax No. (360) 734-7780 (360) 734-8501 e-mail					
(list subsections) 5 of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) On June 1, 2022, the Employer made unilateral changes to the Medical Dental and Vision plans, without prior bargaining, and is engaging in bad faith bargaining. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Heather Ewing Teamsters Local 231 4a. Address (Street and number, city, state, and ZIP code) P.O. Box H Bellingham, WA 98227 4b. Tel. No. (360) 734-7780 4c. Cell No. (360) 734-8501 4e. e-mail heather@231 teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Heather Every Borness Status (360) 734-7780 Office, if any, Cell No. (360) 734-8501 Fax No. (360) 734-8501					
practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) On June 1, 2022, the Employer made unilateral changes to the Medical Dental and Vision plans, without prior bargaining, and is engaging in bad faith bargaining. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Heather Ewing Teamsters Local 231 4a. Address (Street and number, city, state, and ZIP code) P.O. Box H Bellingham, WA 98227 4b. Tel. No. (360) 734-7780 4c. Cell No. (360) 734-8501 4e. e-mail heather@23 I teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters 5. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. 4b. Tel. No. (360) 734-7780 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. 4c. Cell No. (360) 734-7780 Office, if any, Cell No. (360) 734-7780 Office, if any, Cell No. (360) 734-8501 e-mail	The above-named employer has engaged in and is engage	ging in unfair labor practices within the meaning of section 8	B(a), subsections (1) and		
meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) On June 1, 2022, the Employer made unilateral changes to the Medical Dental and Vision plans, without prior bargaining, and is engaging in bad faith bargaining. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Heather Ewing Teamsters Local 231 4a. Address (Street and number, city, state, and ZIP code) P.O. Box H Bellingham, WA 98227 4b. Tel. No. (360) 734-7780 4c. Cell No. (360) 734-8501 4e. e-mail heather@231teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. 7 El. No. (360) 734-7780 Office, if any, Cell No. (360) 739-8298 Fax No. (360) 739-8298 Fax No. (360) 734-780	(list subsections) 5	of the National Labor Re	lations Act, and these unfair labor		
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) On June 1, 2022, the Employer made unitateral changes to the Medical Dental and Vision plans, without prior bargaining, and is engaging in bad faith bargaining. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Heather Ewing Teamsters Local 231 4a. Address (Street and number, city, state, and ZIP code) P.O. Box H Bellingham, WA 98227 4b. Tel. No. (360) 734-7780 4c. Cell No. (360) 319-8298 4d. Fax No. (360) 734-8501 4e. e-mail heather@231 teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filled by a labor organization) International Brotherhood of Teamsters 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. 75. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filled by a labor organization) International Brotherhood of Teamsters 76. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. 77. Full No. (360) 734-7780 Office, if any, Cell No. (360) 739-8298 Fax No. (360) 734-8501 Fear No. (360) 734-8501	practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor practices are practice	s affecting commerce within the		
On June 1, 2022, the Employer made unilateral changes to the Medical Dental and Vision plans, without prior bargaining, and is engaging in bad faith bargaining. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Heather Ewing Teamsters Local 231 4a. Address (Street and number, city, state, and ZIP code) P.O. Box H Bellingham, WA 98227 4c. Cell No. (360) 734-7780 4c. Cell No. (360) 319-8298 4d. Fax No. (360) 374-8501 4e. e-mail heather(@231 teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters 5. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. 1. Tel. No. (360) 734-7780 Office, if any, Cell No. (360) 734-7780 Office, if any, Cell No. (360) 734-8501 Fax No. (360) 734-8501 Print/hype name/and title or office, if any)	meaning of the Act and the Postal Reorganization Act.				
Heather Ewing Teamsters Local 231 4a. Address (Street and number, city, state, and ZIP code) P.O. Box H Bellingham, WA 98227 4b. Tel. No. (360) 734-7780 4c. Cell No. (360) 319-8298 4d. Fax No. (360) 734-8501 4e. e-mail heather@231 teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Hather Ewing Bostes State (Print/type name and title or office, if any) Fax No. (360) 734-780 Office, if any, Cell No. (360) 734-8501 e-mail	engaging in bad faith bargaining.		out prior bargaining, and is		
P.O. Box H Bellingham, WA 98227 (360) 734-7780 4c. Cell No. (360) 319-8298 4d. Fax No. (360) 734-8501 4e. e-mail heather@231teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Heather Fung Bostos State (Print/type name and title or office, if any) Fax No. (360) 734-7780 Office, if any, Cell No. (360) 319-8298 Fax No. (360) 734-8501 e-mail	3. Full name of party filing charge (if labor organization, gi Heather Ewing Teamsters Local 231	ive full name, including local name and number)			
4c. Cell No. (360) 319-8298 4d. Fax No. (360) 734-8501 4e. e-mail heather@23 I teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Heather Eurog Bosperia Station (360) 734-7780 Office, if any, Cell No. (360) 319-8298 Fax No. (360) 734-8501 e-mail	P.O. Box H	9)			
(360) 734-8501 4e. e-mail heather@231teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. 1. Susness (360) 734-7780 Office, if any, Cell No. (360) 319-8298 Fax No. (360) 734-8501 Fax No. (360) 734-8501	Beilingnam, WA 98221				
heather@231teamsters.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Heather Fung Rogressottory (signature of representative or person making charge) Fax No. (360) 734-7780 Fax No. (360) 734-8501 Fax No. (360) 734-8501					
International Brotherhood of Teamsters 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Heather Euring Business (signature of representative or person making charge) (Print/type name and title or office, if any) Fax No. (360) 734-7780 Office, if any, Cell No. (360) 319-8298 Fax No. (360) 734-8501					
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Heather Ewing Rogress to true (360) 734-7780		n of which it is an affiliate or constituent unit (to be filled in wh	hen charge is filed by a labor organization)		
(signature of representative or person making charge) Heather Ewing Business (360) 319-8298 (Print/type name and title or office, if any) Fax No. (360) 734-8501 e-mail	I declare that I have read the abo	ve charge and that the statements			
(360) 734-8501 e-mail	Heather Eury	Heather Ewing Busnoss sature			
	(signature of representative or person making charge)	(Print/type name and title or office, if any)			
	Address P.O. Box H Bellingham, WA 98227	Date 8/18/2022			

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Form NLRB - 501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

AMENDED CHARGE AGAINST EMPLOYER

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

19-CA-301717 8/30/2022

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT				
a. Name of Employer		b. Tel. No.		
Cascade Ambulance Service, Inc. and Metro West Ambulance Service, Inc.,		(b) (6), (b) (7)(C)		
a single and/or joint employer		c. Cell No.		
a congretation joint compreyer				
d. Address (Street, city, state, and ZIP code)	e Employer Representative	f. Fax No.		
Cascade Ambulance -	(b) (6), (b) (7)(C)			
1482 Slater Rd Ste A,		g. e-mail		
Ferndale, WA 98248-8919		(b) (6), (b) (7)(C)		
1 citidale, 11/1 302-10 3010		h. Number of Workers Employed		
Metro West -	Casaada Ambulanaa (b) (6) (b) (7)(C)			
	Cascade Ambulance – (b) (6), (b) (7)(C)	26		
5475 NE Dawson Creek, Dr.				
Hillsboro OR 97124	Metro West – (b) (6), (b) (7)(C)			
i. Type of Establishment (factory, mine,	j. Identify Principal Product or Service			
wholesaler, etc.)				
ambulance company	ambulance and wheelchair transportation			
I. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and and				
	nd these unfair labor practices are practices affecting			
	commerce within the meaning of the Act and the Pos			
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)				
On about live 4 2000 the about Familian delated Onetions (CoVA) and (E) at the Act have the transfer the				
On about June 1, 2022, the above Employer violated Sections 8(a)(1) and (5) of the Act by unilaterally changing the				
medical, dental, and vision plans without first providing the Union with notice and an opportunity to bargain. Through				
	and vision plans, the Employer also modifi			
agreement midterm without the Union	's consent in violation of Section 8(d) of the	e Act.		
3. Full name of party filing charge (if labor organization, give full name, including local name and number)				

3. Full name of party filing charge (if labor organization, give full name, including local name and number) General Teamsters Local Union No. 231					
4a. Address (Street and number, city, state, and ZIP code)	4b. Tel. No.				
P.O. Box H, Bellingham, WA 98227-0298		(360)734-7780			
		4c. Cell No.			
		(360)319-8298			
		4d. Fax No.			
		(360)734-8501			
		4e. e-mail			
		heather@231teamsters.org			
5. Full name of national or international labor organization of	which it is an affiliate or constituent unit (to	be filled in when charge is filed by a labor			
organization)					
International Brotherhood of Teamsters					
6. DECLARATION Tel. No.					
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		(360)734-7780			
		Office, if any, Cell No.			
7/ " -	Heathan T. Freinn	(360)319-8298			
Heather and	Heather T. Ewing,	(000)010-0200			
, 1000	Business Representative				
(signature of representative or person making charge)	(Print/type name and title or office, if	Fax No.			
	any)	(360)734-8501			
Address: P.O. Box H,	Date: /	e-mail			
Bellingham, WA 98227-0298	8/30/77	heather@231teamsters.org			
Somignary Triconer 6200	-12/12	1			
		1			

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	19-CA-301718	Date Filed 8/19/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.			
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer Cascade Ambulance		b. Tel. No. (b) (6), (b) (7)(C)	
		c. Cell No. (b) (6), (b) (7)(C)	
d. Address (Street, city, state, and ZIP code)	e Employer Representative	f. Fax. No. 509-575-4676	
1482 Slater Rd Suite A Ferndale, WA 98248	(b) (6), (b) (7)(C)	d. e-mail (b) (6), (b) (7)(C)	
		h. Number of workers employed 26	
i. Type of Establishment (factory, mine, wholesaler, etc.) Ambulance Company	j. Identify principal product or service Ambulance and wheelchair transportation		
The above-named employer has engaged in and is engage	ging in unfair labor practices within the meaning of section 8	B(a), subsections (1) and	
(list subsections) 5	of the National Labor Re	lations Act, and these unfair labor	
,	aning of the Act, or these unfair labor practices are practice	s affecting commerce within the	
meaning of the Act and the Postal Reorganization Act.			
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) On July 1, 2022, the Employer made unilateral changes to the pay dates, without prior bargaining, and is engaging in bad faith bargaining.			
3. Full name of party filing charge (if labor organization, give full name, including local name and number) Heather Ewing Teamsters Local 231			
4a. Address (Street and number, city, state, and ZIP code P.O. Box H Bellingham, WA 98227)	4b. Tel. No. (360) 734-7780	
Bennighan, WA 70227		4c. Cell No. (360) 319-8298	
		4d. Fax No. (360) 734-8501	
		4e. e-mail heather@231teamsters.org	
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Brotherhood of Teamsters			
I declare that I have read the abo	ARATION ve charge and that the statements	Tel. No. (360) 734-7780	
Heather Every	Heather Ewing, Representative	Office, if any, Cell No. (360) 319-8298	
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No. (360) 734-8501	
Address P.O. Box H Bellingham, WA 98227	Date 8/18/2022	e-mail heather@231teamsters.org	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Form NLRB - 501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

AMENDED CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

19-CA-301718 8/30/2022

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.				
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT				
a. Name of Employer		b. Tel. No.		
Cascade Ambulance Service, Inc. and	Metro West Ambulance Service, Inc.,	(b) (6), (b) (7)(C)		
a single and/or joint employer		c. Cell No.		
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	f. Fax No.		
Cascade Ambulance -	(b) (6), (b) (7)(C)			
1482 Slater Rd Ste A,		g. e-mail		
Ferndale, WA 98248-8919		(b) (6), (b) (7)(C)		
1		h. Number of Workers Employed		
Metro West -	Cascade Ambulance - (b) (6). (b) (7)(C)			
5475 NE Dawson Creek, Dr.	(b) (6), (b) (7)(C)	26		
Hillsboro OR 97124 8919	Metro West - (b) (6), (b) (7)(C)			
i. Type of Establishment (factory, mine,	j. Identify Principal Product or Service			
wholesaler, etc.)				
ambulance company				
ambulance company ambulance and wheelchair transportation				
I. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (5)				
	these unfair labor practices are practices affecting co			
	erce within the meaning of the Act and the Postal Re			
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)				

On about July 1, 2022, the above Employer violated Sections 8(a)(1) and (5) of the Act by unilaterally changing the pay dates for unit employees without first providing the Union with notice and an opportunity to bargain. Through these changes to the pay dates, the Employer also modified the collective-bargaining agreement midterm without the Union's consent in violation of Section 8(d) of the Act.

0	e full name, including local name and numb	70.7
General Teamsters Local Union No. 231		1
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No.
P.O. Box H, Bellingham, WA 98227-0298		(360)734-7780
		4c. Cell No.
		(360)319-8298
		4d. Fax No.
		(360)734-8501
		4e. e-mail
		heather@231teamsters.org
6. DECLARATION I declare that I have read the above charge and that the	•	Tel. No. (360)734-7780
knowledge and be	lief.	, ,
		Office, if any, Cell No.
Heather Eng	Heather T. Ewing,	(360)319-8298
Treater	Business Representative	
(signature of representative or person making charge)	(Print/type name and title or office, if	Fax No.
(o.g., a.a. o o		rax No.
(Signature of person making situage)	any)	(360)734-8501
	1	
, , , , , , , , , , , , , , , , , , , ,	any)	(360)734-8501

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
^{Case} 19-CA-301719	Date Filed 8/18/2022	

INSTRUCTIONS:

	which the alleged unfair labor practice occurred or is occurring	g.
	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Cascade Ambulance		b. Tel. No. (b) (6), (b) (7)(C)
	8	c. Cell No. (b) (6), (b) (7)(C)
d. Address (Street site state and 710 code)	o Employer Perresentative	f. Fax. No. 509-575-4676
d. Address (Street, city, state, and ZIP code) 1482 Slater Rd Suite A Ferndale, WA 98248	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)
		h. Number of workers employed 26
i. Type of Establishment (factory, mine, wholesaler, etc.) Ambulance Company	j. Identify principal product or service Ambulance and wheelchair transportation	
The above-named employer has engaged in and is engage	ging in unfair labor practices within the meaning of section	B(a), subsections (1) and
(list subsections) 5	of the National Labor Re	elations Act, and these unfair labor
practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor practices are practice	es affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
 Basis of the Charge (set forth a clear and concise state On June 2, 2022, the Employer made unilateral cha Agreement, without prior bargaining, and is engagi 	ment of the facts constituting the alleged unfair labor pract anges to the schedule and hourly rates of pay, as out ng in bad faith bargaining.	ices) lined in the Collective Bargaining
 Full name of party filing charge (if labor organization, git Heather Ewing Teamsters Local 231 	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code P.O. Box H)	4b. Tel. No. (360) 734-7780
Bellingham, WA 98227		4c. Cell No. (360) 319-8298
		4d. Fax No. (360) 734-8501
		4e. e-mail heather@231teamsters.org
5. Full name of national or international labor organization International Brotherhood of Teamsters	n of which it is an affiliate or constituent unit (to be filled in when the filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is an affiliate or constituent unit (to be filled in which it is a filled in which it is a filled in which it is a filled in the constituent unit (to be filled in which it is a filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in which it is a filled in the constituent unit (to be filled in whic	hen charge is filed by a labor organization)
I declare that I have read the abo	ARATION ve charge and that the statements	Tel. No. (360) 734-7780
Heather Eury	Heather Ewny Representative	Office, if any, Cell No. (360) 319-8298
(signature of representative or parson making charge)	(Print/type name andfille or office, if any)	Fax No. (360) 734-8501
Address P.O. Box H Bellingham, WA 98227	Date 8/18/2022	e-mail heather@231teamsters.org

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Form NLRB - 501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

AMENDED CHARGE AGAINST EMPLOYER

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

bargaining agreement midterm without the Union's consent in violation of Section 8(d) of the Act.

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

19-CA-301719 8/30/2022

EMPLOYER AGAINST WHOM CHARGE IS BROUGHT				
a. Name of Employer		b. Tel. No.		
Cascade Ambulance Service, Inc. and Metro West Ambulance Service, Inc.,		(b) (6), (b) (7)(C)		
a single and/or joint employer	mono rroot, and alarios corrios, mon,	c. Cell No.		
a single and/or joint employer		C. Sch No.		
d. Address (Street, city, state, and ZIP code)	a Employer Depresentative	f. Fax No.		
	e, Employer Representative (b) (6), (b) (7)(C)	r. rax no.		
Cascade Ambulance -	(6) (6), (6) (1)(6)			
1482 Slater Rd Ste A,		g. e-mail		
Ferndale, WA 98248-8919		(b) (6), (b) (7)(C)		
· ·	×	h. Number of Workers Employed		
Metro West -	Cascade Ambulance - (b) (6), (b) (7)(C)	00		
5475 NE Dawson Creek, Dr.	(b) (6), (b) (7)(C)	26		
Hillsboro OR 97124	Metro West – (b) (6), (b) (7)(C)			
i. Type of Establishment (factory, mine,	j. Identify Principal Product or Service			
	j. Identity Filicipal Fidduct of Service			
wholesaler, etc.)	l			
ambulance company	ambulance and wheelchair transportatio	n		
I. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (5)				
	nd these unfair labor practices are practices affecting			
	commerce within the meaning of the Act and the Po			
2. Basis of the Charge (set forth a clear and concis	se statement of the facts constituting the alleged unfa	air labor practices)		
On about June 2, 2022, the above Em	ployer violated Sections 8(a)(1) and (5) of	the Act by unilaterally changing the		
	o unit employees without first providing the			
to pargain. Through these changes to	schedules and rates of pay, the Employe	r also modified the collective-		

3. Full name of party filing charge (if labor organization, give General Teamsters Local Union No. 231	e full name, including local name and numb	er)
4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No.
P.O. Box H, Bellingham, WA 98227-0298		(360)734-7780
		4c. Cell No.
		(360)319-8298
		4d. Fax No.
		(360)734-8501
		4e. e-mail
		heather@231teamsters.org
5. Full name of national or international labor organization o	f which it is an affiliate or constituent unit (t	
organization)		
International Brotherhood of Teamsters		
6. DECLARATION	N	Tel. No.
I declare that I have read the above charge and that the knowledge and be		(360)734-7780
kilowiedge alld be		Office, if any, Cell No.
M	Heather T. Ewina	(360)319-8298
Heather En	Heather T. Ewing,	(000)010-0200
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Business Representative	<u> </u>
(signature of representative or person making charge)	(Print/type name and title or office, if	Fax No.
	any)	(360)734-8501
Address: P.O. Box H,	Date: 8/30/27	e-mail
Bellingham, WA 98227-0298	_ 130/2	heather@231teamsters.org

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

Case 19-CA-301736

DO NOT WRITE IN THIS SPACE

Date Filed 8/19/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

The an original with NERB Regional Director for the region in	OYER AGAINST WHOM CHARGE IS BROUGHT	aring.
a. Name of Employer	OTENAGAMOT WHOM GHANGE TO BROOGHT	b. Tel. No.
United Parcel Service		(b) (6), (b) (7)(C)
Office Faron Convice		
		c. Cell No.
		(b) (6), (b) (7)(C)
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	(877) 421-0935
4455 7th Ave S		g. e-mail
	(b) (6), (b) (7)(C)	
		^{(b) (6), (b) (7)(4} @ups.com
WA Seattle 98108		h. Number of workers employed
		3303
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Trucking	Package Delivery and Pickup Services	
The above-named employer has engaged in and is engaged		ion 8(a) subsections (1) and
(list subsections) 5		or Relations Act, and these unfair labor
,		<i>'</i>
practices are practices affecting commerce within the me	aning of the Act, of these unfail labor practices are pra	ctices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	oractices)
See additional page		
a da		
3. Full name of party filing charge <i>(if labor organization, g</i> Kris K DeBuck	rive full name, including local name and number)	
Teamsters Local Union 174	Dusilless Agent	
4a. Address (Street and number, city, state, and ZIP cod	e)	4b. Tel. No.
•		(206) 441-6060
		4c. Cell No.
14675 Interurban Ave S, #303		(206) 265-9489
WA Tukwila 98168		` ,
		4d. Fax No.
		(206) 441-4853
		4e. e-mail
		kdebuck@teamsters174.org
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit (to be filled	in when charge is filed by a labor organization)
International Dratherhand of Toomstore		
International Brotherhood of Teamsters		
	ARATION	Tel. No.
	ove charge and that the statements	(206) 441-6060
are true to the best of h	ny knowledge and belief.	Office, if any, Cell No.
K Do	Kris K DeBuck	(206) 265-9489
	Business Agent	- Fax No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	
14675 Interurban Ave S, #303		(206) 441-4853
Address Tukwila WA 98168	Date 08/19/2022 01:33:54 PM	e-mail
		kdebuck@teamsters174.org

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees by making unilateral changes in terms and conditions of employment.

List Changes	Approximate date of change
Annual Ride Policy	07/25/2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

	DO NOT WRITE IN THIS	SPACE
Case	19-CA-301873	Date Filed 8/22/2022
		0/22/2022

multhaup@workerlaw.com

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT a. Name of Employer b. Tel. No. (206) 318-2212 Starbucks Corporation c. Cell No. f. Fax. No. d. Address (Street, city, state, and ZIP code) e. Employer Representative g. e-mail Howard Schultz, CEO hschultz@starbucks.com 2401 Utah Avenue, Suite 800 Seattle, WA 98134 h. Number of workers employed Est. 160,000 j. Identify principal product or service i. Type of Establishment (factory, mine, wholesaler, etc.) Food and Beverage Coffee Shop The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within the past six months, the Employer violated the Act when it denied a work opportunity at a higher pay rate to unionized workers and refused to allow unionized workers to work the extra shifts at the higher pay rate solely because they were unionized. The Union seeks 10(i) relief in this charge. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Workers United 4a. Address (Street and number, city, state, and ZIP code) 4b. Tel. No. (646) 448-6414 Workers United 4c. Cell No. 22 South 22nd St Philadelphia, PA 19103 4d. Fax No. (215) 575-9065 4e. e-mail rminter@pjbwu.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) Service Employees International Union Tel. No. 6. DECLARATION I declare that I have read the above charge and that the statements (206) 257-6001 are true to the best of my knowledge and belief. Office, if any, Cell No. Marina Multhaup, Attorney Fax No. (Print/type name and title or office, if any) (signature of representative or person making charge) (206) 378-4132 Barnard Iglitzin & Lavitt LLP 18 West Mercer St., Ste. 400 e-mail Address Seattle, WA 98119 08/22/2022 Date

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS	SPACE
	Date Filed
19-CA-301881	8/22/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in		rnng.
	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
United States Postal Service		(206) 381-6640
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
PO Box 3998	(b) (6), (b) (7)(C)	g. e-mail
		(b) (6), (b) (7)(C) @usps.gov
WA Seattle 98124		h. Number of workers employed
		148
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Others	Parcel and Mail Delivery	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of section	on 8(a), subsections (1) and
(list subsections) 3,5	of the National Labo	r Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are pra	ctices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
Basis of the Charge (set forth a clear and concise state)	ement of the facts constituting the alleged unfair labor n	ractices)
2. Busis of the charge (bot forth a dear and confide state	smont of the radio conditioning the dileged annul rabor p	14011000)
See additional page		
3. Full name of party filing charge <i>(if labor organization, g</i> Kevin W Gottlieb National Association of Letter Carriers	ive full name, including local name and number) President	
4a. Address (Street and number, city, state, and ZIP code	e)	4b. Tel. No.
, , ,		(206) 284-3420
		4c. Cell No.
210 Queen Anne Ave N #201		(206) 303-9382
WA Seattle 98109		4d. Fax No.
		(206) 284-3432
		4e. e-mail
		gottlieb.branch79@gmail.com
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit <i>(to be filled i</i>	n when charge is filed by a labor organization)
6 DECL	ARATION	Tel. No.
***==*=	ove charge and that the statements	131.140.
are true to the best of m	ny knowledge and belief.	Office if any Call No
I. Gorliel		Office, if any, Cell No.
		- Fax No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	T AN INU.
		e-mail
Address	Date 08/22/2022 09:44:37 AM	_

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

8(a)(3)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) joined or supported a labor organization and in order to discourage union activities and/or membership.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	Letter of Warning	^{(0)(6),(0)(7} /2022

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

	DO NOT WRITE IN THIS	SPACE
Case		Date Filed
	19-CA-301882	8/19/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

File an original with NLRB Regional Director for the region in 1 FMPI	OYER AGAINST WHOM CHARGE IS BROUGHT	iring.
a. Name of Employer		b. Tel. No.
Hanford Mission Integration Solutions		(b) (6), (b) (7)(C)
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code) 2490 Garlick Boulevard P.O. Box 943	e. Employer Representative	g. e-mail
2490 Gallick Boulevald F.O. Box 343	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)@rl.gov
WA Richland 99352		h. Number of workers employed 2500
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Others	Security, Environmental, Energy	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of section	on 8(a), subsections (1) and
(list subsections) 5		or Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are pra	ctices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	oractices)
See additional page		
(b) (6), (b) (7)(C) arty filing charge (if labor organization, g Hanford Guards Union Local 21	rive full name, including lo (b) (6), (b) (7)(C)	
4a. Address (Street and number, city, state, and ZIP code	e)	4b. Tel. No.
		(b) (6), (b) (7)(C)
P.O. Box 687 WA Richland 99352		4c. Cell No.
WA Monard 99332		4d. Fax No.
		4e. e-mail
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit (to be filled i	in when charge is filed by a labor organization)
International Guards Union of America		
	ARATION	Tel. No.
	ove charge and that the statements ny knowledge and belief.	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	Office, if any, Cell No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
P.O. Box 687		
Address Richland WA 99352	Date 08/19/2022 06:33:34 PM	e-mail (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining

representative of its employees by failing to furnish information requested by the union.

Date of request	Employer representative	List items requested	Date refused
07/27/2022		Radiological Survey Report	

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

	DO NOT WRITE IN THIS	SPACE
Case	19-CA-301884	Date Filed 8/22/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

LOYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Starbucks Corporation	
e. Employer Representative	a o mail
Howard Schultz, CEO	g. e-mail hschultz@starbucks.com
Howard Schurz, CLO	
	h. Number of workers employed approx. 500
i. Identify principal product or service	-TF
Food and Beverage	
tices are practices affecting commerce within the me	ection 8(a), subsections (1), (3) and (5) of the aning of the Act, or these unfair labor practices
r violated the Act when, after announced workers to transfer or borrow to oth	eing the closure of two unionized ner stores until effects bargaining
invo full name, including local name and number)	
ive full hame, including local hame and humber)	
e)	4b. Tel. No.
	(646) 448-6414
	4c. Cell No.
	4d. Fax No.
	(215) 575-9065
	4e. e-mail
	rminter@pjbwu.org
n of which it is an affiliate or constituent unit <i>(to be fill</i> e	ed in when charge is filed by a labor organization)
ove charge and that the statements	Tel. No. (206) 257-6001
	Office, if any, Cell No.
	Fax No.
(Fillibitype haine and the of onice, if any)	(206) 378-4132
Date _08/22/2022	e-mail multhaup@workerlaw.com
	ging in unfair labor practices within the meaning of so tices are practices affecting commerce within the meaning of some the Act and the Postal Reorganization Act. The ement of the facts constituting the alleged unfair labor and the Act when, after announced workers to transfer or borrow to other been to allow workers to transfer or borrow to other and the act when, including local name and number) The property of the facts constituting the alleged unfair labor and workers to transfer or borrow to other and the facts of the second property of the facts of the facts of the property of the facts

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

Case 19-CA-301887

Date Filed 8/22/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

File an original with NERB Regional Director for the region in		
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Peace Health South West		(b) (6), (b) (7)(C)
		c. Cell No.
		f Fav. Na
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
400 NE Mother Joseph Pl		g. e-mail
400 NE Mother Joseph Pi	(b) (6), (b) (7)(C)	g. C-maii
		(b) (b) (c) (d) (d) (d) (e) (e) (d) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e
		wpeacerlealin.org
WA Vancouver 98664		h. Number of workers employed
		1300
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Healthcare	Healthcare	
The above-named employer has engaged in and is enga	ging in unfair labor practices within the meaning of cost	ion 9(a) subsections (1) and
		` '
(list subsections) 1	of the National Labo	or Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are pra	ctices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		· ·
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	oractices)
See additional page		
1 3		
3. Full <u>name</u> of party filing charge <i>(if labor organization, g</i>	give full name, including local name and number)	
3. Full name of party filing charge (if labor organization, glacob L Faatz	give full name, including local name and number)	
Oregon Federation of Nurses and Health Professionals		
		4b. Tel. No.
Oregon Federation of Nurses and Health Professionals		
Oregon Federation of Nurses and Health Professionals		(503) 791-9422
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod		
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th		(503) 791-9422
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod		(503) 791-9422 4c. Cell No.
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th		(503) 791-9422
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th		(503) 791-9422 4c. Cell No.
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th		(503) 791-9422 4c. Cell No.
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th		(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223	e)	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th	e)	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organization	e)	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223	e)	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT	e) n of which it is an affiliate or constituent unit <i>(to be filled</i>	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL	n of which it is an affiliate or constituent unit <i>(to be filled</i>	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL I declare that I have read the abo	n of which it is an affiliate or constituent unit (to be filled ARATION ove charge and that the statements	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL I declare that I have read the abo	n of which it is an affiliate or constituent unit <i>(to be filled</i>	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail jfaatz@ofnhp.org in when charge is filed by a labor organization) Tel. No.
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL I declare that I have read the abo	n of which it is an affiliate or constituent unit (to be filled ARATION ove charge and that the statements	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL I declare that I have read the abo	n of which it is an affiliate or constituent unit (to be filled ARATION ove charge and that the statements	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail jfaatz@ofnhp.org in when charge is filed by a labor organization) Tel. No.
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL I declare that I have read the aborare true to the best of name of the state of the stat	n of which it is an affiliate or constituent unit <i>(to be filled</i> ARATION Dive charge and that the statements ny knowledge and belief.	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail jfaatz@ofnhp.org in when charge is filed by a labor organization) Tel. No.
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL I declare that I have read the abo	n of which it is an affiliate or constituent unit (to be filled ARATION ove charge and that the statements	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail jfaatz@ofnhp.org in when charge is filed by a labor organization) Tel. No. Office, if any, Cell No.
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL I declare that I have read the aborare true to the best of name of the state of the stat	n of which it is an affiliate or constituent unit <i>(to be filled</i> ARATION Dive charge and that the statements ny knowledge and belief.	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail
Oregon Federation of Nurses and Health Professionals 4a. Address (Street and number, city, state, and ZIP cod 11560 SW 67th OR Tigard 97223 5. Full name of national or international labor organizatio AFT 6. DECL I declare that I have read the aborare true to the best of name of the state of the stat	n of which it is an affiliate or constituent unit <i>(to be filled</i> ARATION Dive charge and that the statements ny knowledge and belief.	(503) 791-9422 4c. Cell No. 4d. Fax No. 4e. e-mail jfaatz@ofnhp.org in when charge is filed by a labor organization) Tel. No. Office, if any, Cell No.

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

8(a)(1)

Within the previous six months, the Employer refused to hire an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting wages, hours, or other terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employees denied reinstatement or recall (b) (6), (b) (7)(C)	Date restatement or recall denied

8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights protected by Section 7 of the Act by threatening to retaliate against employees if they joined or supported a union.

Name of Employer's Agent/Represer	ntative who made the	Approx	rimate date			
(b) (6), (b) (7)(C)		(b) (6), (b) (7/2	022	_		

8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights protected by Section 7 of the Act by denying an employee's request for union representation during an disciplinary investigation.

brotected by Section 7 of the Act by denying an employee's request for union representation during an disciplinary investigation.
Approximate date representation was denied
(b) (c), (b) (d) (2002)
12022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

Case 19-CA-301943

DO NOT WRITE IN THIS SPACE Date Filed 8/23/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occu OYER AGAINST WHOM CHARGE IS BROUGHT.	rring.
a. Name of Employer	OTENAGAINST WHOM CHANGE IS BROUGHT	b. Tel. No.
UPS		(b) (6), (b) (7)(C)
		c. Cell No.
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	(877) 421-0935
4455 7th Ave S	(b) (6), (b) (7)(C)	g. e-mail
		^{(b)(6),(b)} (7)(^c @ups.com
WA Seattle 98108		
WA Geattle 90100		h. Number of workers employed
		3300
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Trucking	Package delivery	
The above-named employer has engaged in and is enga	ging in unfair labor practices within the meaning of section	on 8(a), subsections (1) and
(list subsections) 5	of the National Labo	r Relations Act, and these unfair labor
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are practices	ctices affecting commerce within the
meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	ractices)
Con additional mana		
See additional page		
3. Full name of party filing charge <i>(if labor organization, g</i> Ted Bunstine	give full name, including local name and number)	74
Teamsters Local 174	President Teamsters Local T	74
4a. Address (Street and number, city, state, and ZIP cod	e)	4b. Tel. No.
	,	(206) 406-6623
		4c. Cell No.
14675 Interurban Ave S Suite 303		(206) 406-6623
WA Tukwila 98133		4d. Fax No.
		(206) 441-4853
		,
		4e. e-mail tbunstine@teamsters174.org
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit (to be filled i	n when charge is filed by a labor organization)
International Brotherhood of Teamsters		
C DECL	ARATION	
	ove charge and that the statements	Tel. No. (206) 406-6623
	ny knowledge and belief.	` ′
Id Pats	To d Domestine	Office, if any, Cell No.
PA 2	Ted Bunstine President Teamsters Local 174	(206) 406-6623
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
14675 Interurban Ave S Suite 303		(206) 441-4853
		e-mail
Address Tukwila WA 98133	Date 08/23/2022 11:36:35 AM	tbunstine@teamsters174.org

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-302060	8/25/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occurring. OYER AGAINST WHOM CHARGE IS BROUGHT.	ng.
a. Name of Employer	O LEAGUING I WHOM OF MADE TO DISCOUNT	b. Tel. No.
Abf		(253) 854-0330
		c. Cell No.
		C. Cell No.
		(F N
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
7226 272nd st	(b) (6), (b) (7)(C)	g. e-mail
WA Kent 98032		h. Number of workers employed
		50
i. Type of Establishment (factory, mine, wholesaler, etc.)	i Identify principal product or service	
Trucking	j. Identity principal product of service	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of section	8(a) subsections (1) and
(list subsections) 5		Relations Act, and these unfair labor
practices are practices affecting commerce within the mea		•
meaning of the Act and the Postal Reorganization Act.	arming of the Act, of those armain laber practices are practic	sos anocang commorco warm ano
Basis of the Charge (set forth a clear and concise state)	ament of the facts constituting the alleged unfair labor pra	cticas)
2. Dasis of the charge (sectorin a dear and concise state	ement of the facts constituting the alleged unital labor pra	chicesy
See additional page		
(b) (6), (b) (7)(C) arty filing charge (if labor organization, g	ive full name, including local name and number)	
(b) (d), (b) (7)(C)		
4a. Address (Street and number, city, state, and ZIP code	e)	4b. Tel. No.
		(b) (6), (b) (7)(C)
(b) (c) (b) (7)(c)		4c. Cell No.
(b) (6), (b) (7)(C)		
		4d. Fax No.
		l and annot
		4e. e-mail
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit /to be filled in u	
3.1 dii fiame of fiationaror internationariabor organization	mor which it is an armiate of constituent unit (to be fined in	when charge is nied by a labor organization)
	ARATION	Tel. No.
	ove charge and that the statements	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) are true to the best of m	ny knowledge and belief.	Office, if any, Cell No.
	(b) (6), (b) (7)(C)	
		Fax No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Tax No.
(b) (6), (b) (7)(C)		o mail
Addres	Date 08/24/2022 06:15:01 PM	e-mail (b) (6), (b) (7)(C)
		(0) (0), (0) (1)(0)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees by making unilateral changes in terms and conditions of employment.

List Changes	Approximate date of change
Have not been called back to work	(b) (6), (b) (7), 2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-302067	8/25/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occurrin	·g.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Startanda Camantina		(206) 318-2212
Starbucks Corporation		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	-
a. Address (Greek, city, state, and 211 code)	o. Employor Representative	g. e-mail
2401 Utah Avenue, Suite 800	Howard Schultz, CEO	hschultz@starbucks.com
Seattle, WA 98134		
Seattle, Willyols I		h. Number of workers employed
		Est. 160,000
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Coffee Shop	Food and Beverage	
	ging in unfair labor practices within the meaning of section ices are practices affecting commerce within the meaning le Act and the Postal Reorganization Act.	
	ment of the facts constituting the alleged unfair labor pract	
Within the last six months, the Employer v	violated the Act by refusing to allow memb	ers of the Union's bargaining
committee who were unable to participate	in bargaining over a temporary store closus	re in Eugene, Oregon in
person to participate virtually through Zoo	m, notwithstanding the Employer's past pra	actice of permitting such
virtual participation.		
Full name of party filing charge (if labor organization, given the second	ive full name, including local name and number)	
Workers United	ve full flame, including local flame and flumber)	
4a. Address (Street and number, city, state, and ZIP code	9)	4b. Tel. No.
, , , , , , , , , , , , , , , , , , , ,	,	(646) 448-6414
Workers United		4c. Cell No.
22 South 22 nd St		16. 66. 116.
Philadelphia, PA 19103		4d. Fax No.
Timadelpina, TTT 15105		(215) 575-9065
		4e. e-mail
		rminter@pjbwu.org
Full name of national or international labor organization	of which it is an affiliate or constituent unit (to be filled in w	C/13 C
Service Employees International Union	•	3 , 3 ,
1 7	ARATION	Tel. No.
I declare that I have read the about	ve charge and that the statements	(206) 257-6001
are true to the best of m	ny knowledge and belief.	Office, if any, Cell No.
IN AL		, ,, =======
10/m/00	Marina Multhaup, Attorney	Fax No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	(206) 378-4132
Barnard Iglitzin & Lavitt LLP	v	e-mail
18 West Mercer St., Ste. 400 Address Seattle, WA 98119	Date 8/25/2022	multhaup@workerlaw.com
	Date Of Lot Lot L	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	19-CA-302068	Date Filed 8/25/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occurrin	ıg.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No.
Starbucks Corporation		(206) 318-2212
Statoticks Corporation		c. Cell No.
d Address (Street situates and 7/D ands)	e. Employer Representative	f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-mail
2401 Utah Avenue, Suite 800	Howard Schultz, CEO	hschultz@starbucks.com
Seattle, WA 98134		h. Number of workers employed
		Est. 160,000
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Coffee Shop	Food and Beverage	
National Labor Relations Act, and these unfair labor pract are practices affecting commerce within the meaning of the		of the Act, or these unfair labor practices
	ement of the facts constituting the alleged unfair labor pract	
	n approximately August 8, 2022, the Employer	
	mployees who are neither unionized nor union	izing while at the same time
denying that benefit to employees who are kn		
	ated the Act nationwide by distributing a comm	unication that forbids employees
from engaging in communications that are pro	•	on a second
	e Employer violated the Act nationwide by dist	
	ew or additional "Performance & Development	
	nionizing and withholding that benefit from em	ployees who are unionized or
unionizing.	is and yet the Union requests 10(i) relief in thi	a mattar
3. Full name of party filing charge (if labor organization, gi	isconduct, the Union requests 10(j) relief in thi	s mauer.
Workers United	we tall hame, including local hame and hamber)	
4a. Address (Street and number, city, state, and ZIP code	9)	4b. Tel. No.
,,,,	,	(646) 448-6414
Workers United		4c. Cell No.
22 South 22 nd St		
Philadelphia, PA 19103		4d. Fax No.
1 /		(215) 575-9065
		4e. e-mail
		rminter@pjbwu.org
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be filled in w	<u> </u>
Service Employees International Union		
6. DECL	ARATION	Tel. No.
	ve charge and that the statements	(206) 257-6012
are true to the best of the	ny knowledge and belief.	Office, if any, Cell No.
96 1. DY 1.		
James SMW	Gabe Frumkin, Attorney	Fax No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	(206) 378-4132
Barnard Iglitzin & Lavitt LLP 18 West Mercer St., Ste. 400		e-mail
Address Seattle, WA 98119	Date 8/25/2022	frumkin@workerlaw.com

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD AMENDED CHARGE AGAINST **EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-302068	9/19/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occ	urring.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer	b. Tel. No. (206) 318-2212	
Starbucks Corporation		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	a o mail
2401 Utah Avenue, Suite 800	Howard Schultz, CEO	g. e-mail hschultz@starbucks.com
Seattle, WA 98134		h. Number of workers employed Est. 160,000
i. Type of Establishment (factory, mine, wholesaler, etc.) Coffee Shop	j. Identify principal product or service Food and Beverage	
The above-named employer has engaged in and is engage National Labor Relations Act, and these unfair labor pract are practices affecting commerce within the meaning of the	ices are practices affecting commerce within the mear	tion 8(a), subsections (1) and (3) of the ning of the Act, or these unfair labor practices
Within the last six months, and specifically sin among other things, granting previously-annously withholding those benefits from employees at include, but may not be limited to: providing i relaxed dress codes, and free clothing items for unionized and unionizing employees. The acture on a nationwide scale. Additionally, on or about a new "My Starbucks Savings" program and "Employer granted these benefits to non-unioniare unionizing.	stores that are unionized or unionizing on a ncreased time for employees to participate or partners who have completed training propal withholding of these benefits constitutes ut September 12, 2022, the Employer promestudent Loan Management Tools." On or a	re not unionized or unionizing while a nationwide basis. These benefits in performance reviews ("PDCs"), ograms that are unavailable to an unlawful withholding of benefits hised new financial benefits through about September 19, 2022, the
3. Full name of party filing charge (if labor organization, given Workers United	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code Workers United 22 South 22 nd St Philadelphia, PA 19103	e)	4b. Tel. No. (646) 448-6414 4c. Cell No. 4d. Fax No. (215) 575-9065 4e. e-mail rminter@pjbwu.org
5. Full name of national or international labor organization Service Employees International Union	of which it is an affiliate or constituent unit (to be filled	919
6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		Tel. No. (206) 257-6012 Office, if any, Cell No. Fax No.
(signature of representative or person making charge) Barnard Iglitzin & Lavitt LLP 18 West Mercer St., Ste. 400 Address Seattle, WA 98119	Gabe Frumkin, Attorney (Print/type name and title or office, if any) Date 09/19/2022	e-mail frumkin@workerlaw.com

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD SECOND AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE				
Case 19	10.04.00000	Date Filed		
	19-CA-302068	9/20/2022		

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.					
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT					
a. Name of Employer		b. Tel. No. (206) 318-2212			
Starbucks Corporation		c. Cell No.			
		f. Fax. No.			
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	q. e-mail			
2401 Utah Avenue, Suite 800	Howard Schultz, CEO	hschultz@starbucks.com			
Seattle, WA 98134		h. Number of workers employed			
		Est. 160,000			
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service				
Coffee Shop	Food and Beverage				
The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.					
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor prac	etices)			
See Attached					
3. Full name of party filing charge (if labor organization, g.	ive full name, including local name and number)				
Workers United	, ,				
4a. Address (Street and number, city, state, and ZIP code	9)	4b. Tel. No.			
, , ,,	,	(646) 448-6414			
Workers United		4c. Cell No.			
22 South 22 nd St					
Philadelphia, PA 19103		4d. Fax No.			
		(215) 575-9065			
		4e. e-mail			
		rminter@pjbwu.org			
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) Service Employees International Union					
6. DECL	Tel. No.				
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		(206) 257-6012			
are true to the best of thy knowledge and belief.		Office, if any, Cell No.			
Halid Zula		Fax No.			
- COMW	Gabe Frumkin, Attorney	(206) 378-4132			
(signature of representative or person making charge) Barnard Iglitzin & Lavitt LLP 18 West Mercer St., Ste. 400	(Print/type name and title or office, if any)	e-mail frumkin@workerlaw.com			
Address Seattle, WA 98119	Date 09/20/2022				

Attachment

2. Basis of the Charge

Within the last six months, and specifically on approximately August 8, 2022, the Employer violated the Act by, among other things, promising a grant of benefit to employees who are neither unionized nor unionizing while at the same time denying that benefit to employees who are known to be unionized or unionizing.

Additionally, on or about August 18, 2022, the Employer violated the Act nationwide by distributing an electronic communication promising opportunities for new or additional "Performance & Development Conversations" for employees who are not represented or in the process of unionizing and withholding that benefit from employees who are unionized or unionizing.

Additionally, on or about September 19, 2022, the Employer violate the Act nationwide by reiterating statements it made in the past promising in-store credit/debit card tipping and faster sick time accrual to employees at stores who are not unionized or unionizing, while withholding those benefits from employees who are unionized or unionizing.

Due to the Employers' repeated and flagrant misconduct, the Union requests 10(j) relief in this matter.

FORM NLRB-501 (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD THIRD AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-302068	10/3/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occ	urring.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer		b. Tel. No. (206) 318-2212
Starbucks Corporation		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-mail
2401 Utah Avenue, Suite 800	Howard Schultz, CEO	hschultz@starbucks.com
Seattle, WA 98134		h. Number of workers employed Est. 160,000
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	250. 100,000
Coffee Shop	Food and Beverage	
The above-named employer has engaged in and is engaged National Labor Relations Act, and these unfair labor practiare practices affecting commerce within the meaning of the	ices are practices affecting commerce within the mean ne Act and the Postal Reorganization Act.	ning of the Act, or these unfair labor practices
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	practices)
3. Full name of party filing charge (if labor organization, gawww. Workers United)	ive full harne, including local harne and number)	
4a. Address (Street and number, city, state, and ZIP code	p)	4b. Tel. No. (646) 448-6414
Workers United		4c. Cell No.
22 South 22 nd St Philadelphia, PA 19103		4d. Fax No. (215) 575-9065
		4e. e-mail rminter@pjbwu.org
5. Full name of national or international labor organization Service Employees International Union	n of which it is an affiliate or constituent unit (to be filled	in when charge is filed by a labor organization)
I declare that I have read the abo	ARATION ve charge and that the statements ny knowledge and belief.	Tel. No. (206) 257-6012 Office, if any, Cell No.
Halid Entr	Gabe Frumkin, Attorney	Fax No. (206) 378-4132
(signature of representative or person making charge) Barnard Iglitzin & Lavitt LLP 18 West Mercer St., Ste. 400	(Print/type name and title or office, if any)	e-mail frumkin@workerlaw.com
Address Seattle, WA 98119	Date 10/ <u>03/2022</u>	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

Attachment

2. Basis of the Charge

Within the last six months, and specifically on approximately August 8, 2022, the Employer violated the Act by, among other things, promising a grant of benefit to employees who are neither unionized nor unionizing while at the same time denying that benefit to employees who are known to be unionized or unionizing.

Specifically, on or about August 18, 2022, the Employer violated the Act nationwide by distributing an electronic communication promising opportunities for new or additional "Performance & Development Conversations" for employees who are not represented or in the process of unionizing and withholding that benefit from employees who are unionized or unionizing.

Due to the Employers' repeated and flagrant misconduct, the Union requests 10(j) relief in this matter.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	19-CA-302157	8/26/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in		rring.
	OYER AGAINST WHOM CHARGE IS BROUGHT	List Tall Nie
a. Name of Employer United States Postal Service		b. Tel. No.
United States Postal Service		(206) 381-6640
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
PO Box 3998	(b) (6), (b) (7)(C)	g. e-mail
WA Seattle 98109		h. Number of workers employed
		125
i. Type of Establishment (factory, mine, wholesaler, etc.)	i Identify principal product or service	
Others	Mail delivery	
The above-named employer has engaged in and is engaged	,	on 9(a) subscations (1) and
(list subsections) 1,5		orro(a), subsections (1) and or Relations Act, and these unfair labor
practices are practices affecting commerce within the me		
meaning of the Act and the Postal Reorganization Act.	aning of the Act, of these diffall labor practices are prac-	suces affecting commerce within the
	amont of the foots constituting the alleged unfoir labors	a va ation a)
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unitair labor p	ractices)
See additional page		
. 0		
3 Full name of party filing charge (if labor organization of	nive full name, including local name and number	
3. Full name of party filing charge <i>(if labor organization, g</i> Kevin Gottlieb	President	
Branch 79		4b. Tel. No.
4a. Address (Street and number, city, state, and ZIP code	<i>3)</i>	
		(206) 284-3420
210 Queen Anne Ave N		4c. Cell No.
WA Seattle 98109		(203) 303-9382
		4d. Fax No.
		(206) 284-3432
		4e. e-mail
		gottlieb.branch79@gmail.com
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit (to be filled i	n when charge is filed by a labor organization)
Natioonal Association of Letter Carriers		
6 DECL	ARATION	I Tal Na
	ove charge and that the statements	Tel. No. (206) 284-3420
are true to the best of m	ny knowledge and belief.	, ,
Kevin Gottlieb		Office, if any, Cell No.
President (200) 000 C		
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
210 Queen Anne Ave N		(206) 284-3432
Address Seattle WA 98109	Date 08/26/2022 01:39:05 PM	e-mail
Audiess	Date	gottlieb.branch79@gmail.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights protected by Section 7 of the Act by maintaining work rules that prevent or discourage employees from engaging in protected concerted activities.

Work Rule

Weingarten Right"s Violations

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees.

Form NLRB - 501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE Date Filed 19-CA-302385 8/30/2022

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT a. Name of Employer b. Tel. No. 277-266-3548 AddShoppers Inc. c. Cell No. d. Address (Street, city, state, and ZIP code) f. Fax No. e. Employer Representative (b) (6), (b) (7)(C) 15806 Brookway Dr. Ste Zuc, @addshoppers.com Huntersville, NC, 28078 h. Number of Workers Employed 57 i. Type of Establishment (factory, mine, j. Identify Principal Product or Service wholesaler, etc.) e-commerce marketing e-commerce marketing I. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) On about (b) (6), (b) (7)(C), 2022, the Employer discriminated against employee (b) (6), (b) (7)(C) by discharging in retaliation for and/or in order to discourage protected concerted activities and/or union activities or membership. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) (b) (6), (b) (7)(C), an individual 4a. Address (Street and number, city, state, and ZIP code) 4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-mail (b) (6), (b) (7)(C) 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) 6. DECLARATION Tel. No. I declare that I have read the above charge and that the statements are true to the best of my (b) (6), (b) (7)(C) knowledge and belief. Office, if any, Cell No. (b) (6), (b) (7)(C) (b) (6), (b) (7)(C), an individual (signature or representative or person making charge) (Print/type name and title or office, if Fax No. any) (b) (6), (b) (7)(C) Address: Date: e-mail 08/27/2022 (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes. (b) (6), (b) (7)(C)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	40.04.000407	Date Filed
19-CA-302427	19-CA-302427	8/30/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in		curring.
	OYER AGAINST WHOM CHARGE IS BROUGHT	I b. Tal Na
a. Name of Employer		b. Tel. No.
United states postal service		(b) (6), (b) (7)(C)
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
205 W Washington Ave	(b) (6), (b) (7)(C)	g. e-mail
		(b) (6), (b) (7)(C) @usps.gov
WA Yakima 98909		
		h. Number of workers employed 200
i. Type of Establishment (factory, mine, wholesaler, etc.)	i Identify principal product or service	200
1. Type of Establishment (factory, filline, wholesaler, etc.)). Identify principal product of service	
The above-named employer has engaged in and is engaged	ring in unfair labor practices within the meaning of sec	etion 8(a) subsections (1) and
(list subsections) 4,3,5		por Relations Act, and these unfair labor
practices are practices affecting commerce within the me		
meaning of the Act and the Postal Reorganization Act.	arming of the Act, of those arman labor practices are pro-	actions arresting commerce within the
Basis of the Charge (set forth a clear and concise state)	ment of the facts constituting the alleged unfairlabor	r practice s)
2. Dasis of the charge (set forth a clear and concise state	smem of the facts constituting the alleged dilial labor	practices
See additional page		
(b) (6), (b) (7)(C) party filing charge (if labor organization, g		
(b) (6), (b) (7)(C)	3	
4a. Address (Street and number, city, state, and ZIP code		4b. Tel. No.
+a. Address (officer and namber, dity, state, and 2n code	•)	(b) (6), (b) (7)(C)
		4c. Cell No.
(b) (6), (b) (7)(C)		40. Cell No.
		415 11
		4d. Fax No.
		4e. e-mail
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organizatio	n of which it is an affiliate or constituent unit (to be filled	I in when charge is filed by a labor organization)
6 DECL	ARATION	I Tal Ma
	ove charge and that the statements	Tel. No. (b) (6), (b) (7)(C)
	ny knowledge and belief.	
	(b) (6), (b) (7)(C)	Office, if any, Cell No.
	(2) (3), (2) (.),(3)	
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
(b) (6), (b) (7)(C)		
Address	Date 08/30/2022 09:56:57 PM	e-mail
,		(b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

8(a)(3)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) joined or supported a labor organization and in order to discourage union activities and/or membership.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	Improper Discipline Being Issued	(D)(GL(D)(7)) 2022

8(a)(4)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) filed charges or cooperated with the NLRB.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	Improper Discipline Being Issued	^{®)(S, ®)(7} /2022

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees.

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees by making unilateral changes in terms and conditions of employment.

List Changes	Approximate date of change
submitting docs for months/changed unilaterally	(D)(5), (D)(7) /2022

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

Case 19-CA-302454 Date Filed 8/31/2022

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

File an original with NLRB Regional Director for the region in 1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGH	
a. Name of Employer		b. Tel. No.
Compass Health		(b) (6), (b) (7)(C)
'		c. Cell No.
		(b) (6), (b) (7)(C)
		f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	
4526 Federal Avenue	(b) (6), (b) (7)(C)	g. e-mail
Everett, WA 98203		(b) (6), (b) (7)(C) @compassh.org
		h. Number of workers employed 385
i. Type of Establishment (factory, mine, wholesaler, etc.) Hospital	j. Identify principal product or service Healthcare	
The above-named employer has engaged in and is engaged		
(list subsections) (5)		I Labor Relations Act, and these unfair labor
practices are practices affecting commerce within the me meaning of the Act and the Postal Reorganization Act.		
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair l	abor practices)
On July 21st, 2022, Compass announ	•	
advise management on workplace iss		•
use the JLM committee process in the		9
workplace issues, Compass refused a		s alternative committee in
violation of its duty to bargain with the	Union.	
3. Full name of party filing charge (if labor organization, g	iive full name, including local name and number)	
SEIU Healthcare 1199NW	ive fail frame, including local frame and framber)	
4a. Address (Street and number, city, state, and ZIP code) 4b. Tel. No.		
15 S Grady Way Suite 200		425-917-1199
Renton, WA 98057		4c. Cell No.
		425-306-2802
		4d. Fax No. 425-917-9707
		4e. e-mail carsonf@seiu1199nw.org
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be	filled in when charge is filed by a labor organization)
Service Employees Internation	onal Union	
	ARATION	Tel. No.
	ove charge and that the statements ny knowledge and belief.	425-917-1199
(b) (6), (b) (7)(C) Office, if any, Cell No. (b) (6), (b) (7)(C)		
entative or person making charge)	Fax No.	
, , , , , , , , , , , , , , , , , , , ,	425-917-9707	
Address 15 S Grady Way Suite 200 Rente	on, WA 98057 Date 8/31/2022	e-mail ©seiu1199nw.org
WILLELL EALSE STATEMENTS ON THIS CHARGE	CAN BE BUNISHED BY FINE AND IMPRISON	MENT (U.C. CODE TITLE 40 CECTION 4004)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

FIRST AMENDED CHARGE AGAINST EMPLOYER

Case 19-CA-302454 Date Filed 1/3/2023

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occurring	ng.	
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer Compass Health		b. Tel. No. (b) (6), (b) (7)(C)	
	c. Cell No. (b) (6), (b) (7)(C)		
Address (Otrect city state and 710 ands)	a Faraleura Danasantatius	f. Fax. No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-mail	
4526 Federal Avenue Everett, WA 98203	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) @compassh.org	
		h. Number of workers employed 385	
i. Type of Establishment (factory, mine, wholesaler, etc.) Hospital	j. Identify principal product or service Healthcare		
The above-named employer has engaged in and is engage	ging in unfair labor practices within the meaning of section	8(a), subsections (1) and	
(list subsections) (5)	of the National Labor Re	elations Act, and these unfair labor	
practices are practices affecting commerce within the mea	aning of the Act, or these unfair labor practices are practic	es affecting commerce within the	
meaning of the Act and the Postal Reorganization Act.			
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor prac	tices)	
On July 21st, 2022, Compass annound	ced a plan to select workers to serve or	n a committee that would	
advise management on workplace issu	ues. When the Union demanded Comp	ass cease its efforts and	
use the JLM committee process in the	parties contract for labor/management	discussions regarding	
workplace issues, Compass refused a	nd has persisted in developing its alter	native committee in	
yiolation of its duty to bargain with the	Union, including but not limited to solic	iting ACT committee	
applications from Unit employees, and selecting applicants for participation on the ACT committee.			
3. Full name of party filing charge (if labor organization, g SEIU Healthcare 1199NW	give full name, including local name and number)		
4a. Address (Street and number, city, state, and ZIP code) 4b. Tel. No.			
15 S Grady Way Suite 200		425-917-1199	
Renton, WA 98057		4c. Cell No. 425-306-2802	
		4d. Fax No. 425-917-9707	
		4e. e-mail carsonf@seiu1199nw.org	
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be filled in w	hen charge is filed by a labor organization)	
Service Employees International Union			
I declare that I have read the abo	ARATION ve charge and that the statements ny knowledge and belief.	Tel. No. 425-917-1199	
are true to trie best of the	(b) (6), (b) (7)(C)	Office, if any, Cell No. (b) (6), (b) (7)(C)	
sentative or person making charge)	(Print/type name and title or office, if any)	Fax No. 425-917-9707	
Address 15 S Grady Way Suite 200 Renton, WA 98057 Date 1/3/2023 e-mail @seiu1199nw.org			

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

FORM NLRB-501 (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	_	Date Filed
19-CA-302460	19-CA-302460	8/31/2022

INSTRUCTIONS:

The all original with NEKB Regional Director for the region in	which the alleged unfair labor practice occurred or is occur	ring.	
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT		
a. Name of Employer		b. Tel. No.	
The Spokesman Review / Cowles Publishing		(b) (6), (b) (7)(C)	
The sponesman review, cowies racinstang		c. Cell No.	
		f. Fax. No.	
		I. Fax. No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative		
999 W. Riverside Ave.	(b) (6), (b) (7)(C)	g. e-mail	
Spokane, WA 99201		(b) (6), (b) (7)(C) @cowlescompany.com	
		h. Number of workers employed	
		6	
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service		
publisher / commercial print shop	print newspapers and commercial pri	int products	
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of section	on 8(a), subsections (1) and	
(list subsections) 5	of the National Labor	Relations Act, and thest unfair labor	
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices affecting	commerce within the meaning of	
the Act and the Postal Reorganization Act.		-	
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor pr	actices)	
2. Busine of the offerigo (bot forth a block and borroise state	sment of the radio conditioning the alleged amail rador pro	2011000)	
Widi d l d i Footon i la l	41 . A . 41	C	
Within the last six months the Employer violated unit members including changing mark-ups by rea			
unit members including changing mark-ups by ref	moving end times on shifts and changing now price	ority applies to shift selection.	
3. Full name of party filing charge (if labor organization, g Teamsters Local Union No. 117	ive full name, including local name and number)		
4a. Address (Street and number, city, state, and ZIP code		4b. Tel. No.	
	5)	206-441-4860	
14675 Interurban Ave. South, Suite 307			
Tukwila, WA 98168		4c. Cell No.	
		4d. Fax No.	
		206-441-3153	
		4e. e-mail	
		fallon.schumsky@teamsters117.org	
5. Full name of national or international labor organization	o of which it is an affiliate or constituent unit (to be filled in		
3. Full flame of flational of international labor organization	To which it is an annuate of constituent unit (to be illed in	when charge is lifed by a labor organization)	
International Brotherhood of Teamsters			
& DECI	ARATION	Tel. No.	
	ove charge and that the statements	206-441-4860	
	ny knowledge and belief.		
7.11	Fallon Schumsky, General Counsel	Office, if any, Cell No.	
- Jalin	·	206-794-0335	
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.	
		206-441-3153	
14675 Interurban Ave South Ste 307 Tul	kwila, WA 98168 August 31, 2022	e-mail	
Address	Date	fallon.schumsky@teamsters117.org	
I .		T	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE			
Case 19-CA-302500	Date Filed 8/31/2022		

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occu OYER AGAINST WHOM CHARGE IS BROUGHT.	rring.		
a. Name of Employer	b. Tel. No.			
360 Sheetmetal LLC		(360) 750-8558		
300 Sheetinetal LLC		` '		
		c. Cell No.		
		(5.)		
		f. Fax. No.		
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	n a maril		
2400 NE 65th Ave. Suite A	(b) (6), (b) (7)(C)	g. e-mail		
		^{(b) (6). (} @360sheetmetal.com		
WA Vancouver 98661		h. Number of workers employed		
		15		
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service			
Others	Duct fabrication			
The above-named employer has engaged in and is engaged	I ging in unfair labor practices within the meaning of section	on 8(a), subsections (1) and		
(list subsections) 5.1		r Relations Act, and these unfair labor		
practices are practices affecting commerce within the me		·		
meaning of the Act and the Postal Reorganization Act.				
2. Basis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	ractices)		
2. Basis of the smarge (serverth a sieur and service stat.	smem er tire radio denetitating tire anegea armai raser p	140.000)		
See additional page				
3. Full name of party filing charge (if labor organization, g	rive full name, including local name and number)			
Brian Noble International Association of Sheet Metal, Air, Rail, and Tr				
4a. Address (Street and number, city, state, and ZIP code		4b. Tel. No.		
Tall tall tall tall tall tall tall tall	-,	(503) 254-0123		
		4c. Cell No.		
2379 NE 178th Ave. Suite 16		46. GCII 146.		
OR Portland 97230		4d FayNa		
		4d. Fax No.		
		4e. e-mail		
		bnoble@smw16.org		
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization)				
6 DECL	ARATION	Tel. No.		
	ove charge and that the statements	(503) 226-6111		
	ny knowledge and belief.			
	Danial Hutzenhiler	Office, if any, Cell No.		
Daniel Hutzenbiler Attorney				
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.		
1635 NW Johnson St.				
Address Portland OR 97209	Date 08/31/2022 04:01:55 PM	e-mail		
		dhutzenbiler@mbjlaw.com		

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights

protected by Section 7 of the Act by promising better working conditions if employees did not join or support a union.

Name of Employer's Agent/Representative who made the statement	Approximate date
(b) (6), (b) (7)(C)	08/03/2022
(b) (6), (b) (7)(C)	08/07/2022

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees.

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining

representative of its employees by making unilateral changes in terms and conditions of employment.

List Changes	Approximate date of change		
Implemented mandatory overtime.	07/21/2022		

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE			
Case	Date Filed		
19-CA-302507	8/31/2022		

INSTRUCTIONS:

	OYER AGAINST WHOM CHARGE IS BROUGHT		
a. Name of Employer		b. Tel. No.	
Sephora		206-569-3145	
		c. Cel No. (b) (6), (b) (7)(C)	
		f. Fax. No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	a a mail	
2020 Westlake Ave. Seattle WA, 98121	(b) (6), (b) (7)(C)	g. e-mail	
		h, Number of workers employed 14	
i. Type of Establishment (factory, mine, wholesaler, etc.) Cosmetics Retailor	j. Identify principal product or service Cosmetics, Esthetic Services		
The above-named employer has engaged in and is engag	ging in unfair labor practices within the meaning of se	ction 8(a), subsections (1) and	
(list subsections)	of the National Lab	oor Relations Act, and these unfair labor	
practices are practices affecting commerce within the mea meaning of the Act and the Postal Reorganization Act.	aning of the Act, or these unfair labor practices are pr	actices affecting commerce within the	
formula based on experience to determine how em	ployees. (b) (6), (b) (7)(explicitly asked (b) (6), (b) (7)(c) to keep (b) (6). (c) wages to (b) (6). (b) (7)(c) At the	
formula based on experience to determine how emsame time sharing that there is no policy against shomplainant believes this was purposful. In attemption of party filing charge lift labor organization, given the same of party filing charge lift labor organization, given the same of party filing charge lift labor organization, given the same of party filing charge lift labor organization, given the same of party filing charge lift labor organization, given the same of party filing charge lift labor organization, given the same charge lift labor organization.	aployees. (b) (6), (b) (7)(6) asked (b) (6), (b) (7)(6) aring wages. This is unlawful under The NLR obstoquell collective bagaining a right granted	to keep wages to he At the A. All conversations were informal,	
formula based on experience to determine how emsame time sharing that there is no policy against shoomplainant believes this was purposful. In attemption, and the sharing that there is no policy against shoomplainant believes this was purposful. In attemption, and the sharing that there is no policy against sharing the sharing that the	aployees. (b) (6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	c) to keep wages to wages to At the A. All conversations were informal, to employees.	
formula based on experience to determine how emsame time sharing that there is no policy against shoomplainant believes this was purposful. In attemption of party filing charge (if labor organization, given) (b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	aployees. (b) (6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	to keep wages to he At the A. All conversations were informal,	
formula based on experience to determine how emsame time sharing that there is no policy against shoomplainant believes this was purposful. In attemption of party filing charge (if labor organization, given) (b) (6), (b) (7)(C) The sharing that there is no policy against shoot properties. In attemption of party filing charge (if labor organization, given) (b) (6), (b) (7)(C) The sharing that there is no policy against shoot properties and purpose that the sharing that there is no policy against shoot properties and purpose the sharing that there is no policy against shoot properties and purpose the sharing that there is no policy against shoot properties and properties are shoot properties.	aployees. (b) (6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	C) to keep wages to wages to At the A. All conversations were informal, to employees. 4b. Tel. No. (b) (6), (b) (7)(C)	
formula based on experience to determine how emsame time sharing that there is no policy against shoomplainant believes this was purposful. In attemption of party filing charge (if labor organization, given) (b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	aployees. (b) (6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	c) to keep wages to wages to At the A. All conversations were informal, to employees.	
formula based on experience to determine how emsame time sharing that there is no policy against shoomplainant believes this was purposful. In attemption of party filing charge (if labor organization, given by (b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	aployees. (b) (6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	C) to keep wages to wages to At the A. All conversations were informal, to employees. 4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No.	
formula based on experience to determine how emsame time sharing that there is no policy against shoomplainant believes this was purposful. In attemption of party filing charge (if labor organization, given) (b) (6), (b) (7)(C) 4a. Address (Street and number, city, state, and ZIP code)	aployees. (b) (6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (b) (7)(6), (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	to keep wages to lead to the A. All conversations were informal, to employees. 4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. (b) (6), (b) (7)(C)	
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WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE			
Case	Date Filed		
19-CB-300711	8/3/2022		

			ctice occurre	<u></u>
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH			
a. Name		b. Union Rep	resentative	to contact
Longshoreman's & Warehouse Union Local 19		(b) (6), (b) (7)	(C)	
		Title: (b) (6), (b) (7)((C)
			<i>// </i>	
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.
3440 E Marginal Way S.		(206) 623-74	61	
WA Seattle 98134		f. Fax No.		g. e-Mail
		(206) 623-81	36	@ilwulocal19.org
h. The above-named labor organization has engaged in and is engaging	g in unfair labor practices wit	hin the meanir	ng of section	8(b) and (list subsections)
(1)(A),(3) are practices affecting commerce within the meaning of the Act, or the	of the Natio	onal Labor Rel	ations Act, a	and these unfair labor practices
the Act and the Postal Reorganization Act.	iese unian iabor practices ar	e practices and	ecung comm	ierce within the meaning of
Basis of the Charge (set forth a clear and concise statement of the	facts constituting the allege	d unfair labor p	ractices)	
	g		,	
See additional page				
2. Name of Family and		4a Tel No		h Cell No
Name of Employer Pacific Maritime Association		4a. Tel. No.	46	b. Cell No.
Name of Employer Pacific Maritime Association		4a. Tel. No. (206) 352-37 c. Fax No.	46	b. Cell No. d. e-Mail
. ,		(206) 352-37 c. Fax No.		
Pacific Maritime Association		(206) 352-37	34	d. e-Mail
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code)		(206) 352-37 c. Fax No.	34	
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st.		(206) 352-37 c. Fax No.	34	d. e-Mail
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119		(206) 352-37 c. Fax No. (206) 298-34	34 6. Employ	d. e-Mail ver representative to contact
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st.	Identify principal product	(206) 352-37 c. Fax No. (206) 298-34	34 6. Employ	d. e-Mail
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119	Identify principal product	(206) 352-37 c. Fax No. (206) 298-34 or service	6. Employ 9. Numbe	d. e-Mail ver representative to contact er of workers employed
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119	Identify principal product	(206) 352-37 c. Fax No. (206) 298-34 or service	6. Employ 9. Numbe	d. e-Mail ver representative to contact
5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	(206) 352-37 c. Fax No. (206) 298-34 or service	6. Employ 9. Numbe	d. e-Mail rer representative to contact er of workers employed b. Cell No.
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge	8. Identify principal product	(206) 352-37 c. Fax No. (206) 298-34 or service	6. Employ 9. Numbe	d. e-Mail rer representative to contact er of workers employed b. Cell No. d. e-Mail
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Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge	8. Identify principal product	(206) 352-37 c. Fax No. (206) 298-34 or service	6. Employ 9. Numbe	d. e-Mail rer representative to contact er of workers employed b. Cell No. d. e-Mail
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)	8. Identify principal product	(206) 352-37 c. Fax No. (206) 298-34 or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	9. Numbe	d. e-Mail rer representative to contact er of workers employed b. Cell No. d. e-Mail
5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)		(206) 352-37 c. Fax No. (206) 298-34 or service	9. Numbe	d. e-Mail rer representative to contact er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)
Pacific Maritime Association 5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)	pest of my knowledge and belief	(206) 352-37 c. Fax No. (206) 298-34 or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	9. Numbe	d. e-Mail rer representative to contact er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)
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5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION 1 d _{(b) (6), (b) (7)(C)} have read the above charge and that the statements are true to the boundary of the statements are true to the statement are true to the statemen	pest of my knowledge and belief	(206) 352-37 c. Fax No. (206) 298-34: or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	9. Numbe	d. e-Mail rer representative to contact er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)
5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I do (6) (6) (7)(C) have read the above charge and that the statements are true to the best (signature of representative or person making charge) (Print/type in	pest of my knowledge and belief (b) (6), (b) (7)(C)	(206) 352-37 c. Fax No. (206) 298-34: or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No. Tel. Cell	34 6. Employ 9. Numbe C) No. (b) (6), (b) No.	d. e-Mail rer representative to contact er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)
5. Location of plant involved (street, city, state and ZIP code) 301 W. Republican st. WA Seattle 98119 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I do 10 (0) (7)(C) have read the above charge and that the statements are true to the boundary of the statement of the	pest of my knowledge and belief (b) (6), (b) (7)(C) name and title or office, if any	(206) 352-37 c. Fax No. (206) 298-34: or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	34 6. Employ 9. Numbe (b) (6), (b) No. No.	d. e-Mail rer representative to contact er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights

protected by Section 7 of the Act by threatening to retaliate against employees if they did not join or support the union.

Name of the Union Agent/Representative who made the threat	Date the threats were made
(b) (6), (b) (7)(C)	08/03/2022

8(b)(3)

Within the previous six months, the above-named labor organization has failed and refused to bargain in good faith with the employer.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE			
Case	19-CB-300730	8/2/2022	

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

		3	TOTAL PROPERTY.			
1. LABOR ORGANIZATION OR I	TS AGENTS	AGAINST WHICH CHAI				
				b. Union Representative to contact b) (6), (b) (7)(C)		
c. Address (Street, city, state, and ZIP code) 2900 Eastlake Ave. E, Ste. 220 Seattle, WA 98102			d. Tel. No		e. Cell No. (b) (6), (b) (7)(C)	
			f. Fax. No (206) 441			
			g. e-mail	peiu8.org		
 h. The above-named labor organization has engaged in and is eng (3) practices are practices affecting commerce within the meaning of meaning of the Act and the Postal Reorganization Act. 		of the Nat	onal Labor R	elations Act, a	nd these unfair labor	
2. Basis of the Charge (set forth a clear and concise statement of the	he facts cons	tituting the alleged unfair	labor practic	es)		
Within the past six months, the above-referenced Labor Or 2022 by the Charging Party seeking information relating		aces filed by two of its	s members.			
3. Name of Employer Pacific Northwest Regional Council of Carpenters		4a. Tel. No. (253) 945-8811	b. Cell No n/a	*	c. Fax No. n/a	
		d. e-mail jim.gleason@carper	iters.org			
5. Location of plant involved (street, city, state and ZIP code) Pacific Northwest Regional Council of Carpenters 25120 Pacific Hwy. S, Kent, WA 98032			6. Employe Jim Gleas	er representati son	ve to contact	
7. Type of establishment (factory, mine, wholesaler, etc.) Labor Union		principal product or service Bargaining	ce	9. Number of 82	of workers employed	
10. Full name of party filing charge Desmond C. Lee / Marcelle A. Obeid				*		
11. Address of party filing charge (street, city, state and ZIP code) 533 S. Fremont Ave., 9th Floor, Los Angeles, CA 90071		11a. Tel. No. (213) 488-4100	b. Cell No. n/a c. Fax No. (213) 488-4180		c. Fax No. (213) 488-4180	
		d. e-mail Dlee@shanleyapc.com / Mobeid@shanleyapc.com				
12. DECLARATION I declare that I have read the above charge and that the statement are true to the best of my knowledge and belief. Desmond C.				00		
		mond C. Lee, Esq. Cell No. n/a				
signature of representative or person making charge) (Print/type name and title or office, if any		ame and tille or office, if any	Fax No. (213) 488-4180		80	
Address 533 S. Fremont Ave., 9th Floor, Los Angeles, CA 90071 Date Aug 2, 2022			e-mail Dlee@shanleyapc.com / Mobeid@shanleyapc.com			

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

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INTERNET FORM NLRB-508 (2-08)

FORM EXEMPT UNDER 44 U.S.C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

Case 19-CB-301409 Date Filed 8/15/2022

DO NOT WRITE IN THIS SPACE

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring

The tree of the tr	region in which the dileged d	man rabor pra	otioo oocaiii	od of is occurring.	
LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARGE IS	BROUGHT		
. Name		b. Union Representative to contact			
Laborers 242 (LIUNA)		(b) (6), (b) (7)(C)			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.	
22323 Pacific Highway S, Des Moines, WA 98198		(206) 441-0470			
		f. Fax No.		g. e-Mail	
		(206) 728-	8756		
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor Rela	ations Act, a	and these unfair labor practices	
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor p	ractices)		
Within the past 6 months, the Union has violated its duty	of fair representation t	o (b) (6), (b)	(7)(C)	by failing to dispatch	
(b) (6), (b) (6), (confused with (b) (6), (b)					
3. Name of Employer		4a. Tel. No.		b. Cell No.	
Reign City Services		206-979-7911			
		c. Fax No.		d. e-Mail	
5. Location of plant involved (street, city, state and ZIP code)		-	6. Employ	ver representative to contact	
Seattle, WA					
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	ct or service 9. Number		er of workers employed	
construction	construction				
10. Full name of party filing charge		11a. Tel. No.		b. Cell No.	
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	
		c. Fax No.		d. e-Mail	
11. Address of party filing charge (street, city, state and ZIP code.)				(b) (6), (b) (7)(C)	
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)				(2) (2) (2) (1)	
2. DECLARATION	the best of my knowledge and belie	f. Tel.		(b) (7)(C)	
By(sign (b) (6), (b) (7)(C)(b) (6), (b) (7)(C)(b) (6), (b) (7)(C)					
ters.	name and the or office, if any	Fax			
(b) (6) (b) (7)(C)	- 1	e-M	ail (I-) (O)	(b) (7)(0)	
(b) (6), (b) (7)(C)	-8	15-4e-M	(b) (6),	(b) (7)(C)	
Addres	(date)				

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

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UNITED STATES OF AMERICA		DO NOT WRITE IN THIS SPACE			
NATIONAL LABOR RELATIONS BOAR	D	Case	Date filed		
CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS		19-CB-301625	8/18/2022		
INSTRUCTIONS: File an original of this charge with the occurred or is occurring.					
	OR ITS AGENTS AGA	INST WHICH CHARGE IS BR			
a. Name Operating Engineers Local 612		b. Union Representative to (b) (6), (b) (7)(C)	Contact		
c. Address 1555 Fawcett Ave, Tacoma, WA 98402		d. Tel. No. (253)572-9612 f. Fax No.	e.e. Cell No.		
		T. Fax No.	g. e-Mail		
h. The above-named labor organization or its agents have 8(b)(1)(A) of the National Labor Relations Act, and the the Act, or are unfair practices affecting commerce with 2. Basis of the Charge (set forth a clear and concise state).	se unfair labor practice hin the meaning of the	es are unfair practices affecti Act and the Postal Reorgani	ng commerce within the meaning of ization Act.		
The Union has failed to place (b) (6), (b) (7)(0 of hours. Since about June 2022, the above	named labor orga	nization by (b) (6), (b)	(7)(C) has refused to		
the "A list". Within the last six months, the U	nion has restraine	d and coerced employe	ees in the exercise of rights		
protected by Section 7 of the Act by operatin faith.	ig a hiring hall in a	n manner that was arbiti	rary, discriminatory or in bad		
3. Name of Employer		4a. Tel. No.	4b. Cell No. 0		
Hos Brothers		425 481 5569	,		
		4c. Fax No.	4d. e-Mail 2		
Location of Plant involved (street, city, state, and ZIP code) 6. E		6. Employer representative to contact			
7733 W Bostian Rd, Woodinville, WA 98072			3		
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	or service	9. Number of Workers employed		
Construction	Construction		50		
10. Full name of party filing charge (b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C)	11b. Cell No. (b) (6), (b) (7)(C)		
		11c. Fax No.	11d e-Mail		
		NA	(b) (6), (b) (7)(C)		
11. Address of party filing charge (street, city, state, and 2	ZIP code)	J,			
(b) (6), (b) (7)(C)					
	12. DECLARAT	ION			
I declare that I have read the above charge and	that the statements	therein are true to the best	of my knowledge and belief.		
(b) (6), (b) (7)(C)			Tel No.		
Ву	(b) (6), (b)	(7)(C)	(b) (6), (b) (7)(C)		
(signature or representative or person making charge)		me and title or office, if any	Cell No. (b) (6), (b) (7)(C)		
Address: (b) (6), (b) (7)(C)	,	Date:	Fax No.		
		8/10/202	e-Mail (b) (6), (b) (7)(C)		

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 *et seq.* The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE				
Case	Date Filed			
19-CB-301685	8/18/2022			

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	ntair labor prac	tice occurre	ed or is occurring.
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH			
a. Name		b. Union Rep	resentative	to contact
Teamsters Local #81		(b) (6), (b) (7)(C)	
		Title: (b) (6), (b) (7)((C)
			,,,,,,	
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	C)	e. Cell No.
1874 ne 162 ave		(b) (6), (b) (7)(()	q. e-Mail
OR portland 97230		f. Fax No.		g. e-iviali
h. The above-named labor organization has engaged in and is engagin				and these unfair labor practices
(1)(A) are practices affecting commerce within the meaning of the Act, or the	nese unfair labor practices are	e practices affe	ecting comm	nerce within the meaning of
the Act and the Postal Reorganization Act.				
2. Basis of the Charge (set forth a clear and concise statement of the	facts constituting the alleged	d unfair labor p	ractices)	
See additional page				
ooo dadiilonal pago				
A Name of Francisco		4a. Tel. No.		b. Cell No.
Name of Employer Tforce freight		(503) 247-24	60	D. Cell No.
noice neight		c. Fax No.		d. e-Mail
Location of plant involved (street, city, state and ZIP code)			6 Employ	ver representative to contact
1025 ne columbia blvd			Fernando	
OR portland 97211				,
7. Type of establishment (factory, mine, wholesaler, etc.)	Identify principal product	or service	9. Numbe	er of workers employed
, , , , , , , , , , , , , , , , , , , ,	o. raoriiii) principai product			
Full name of party filing charge		11a. Tel. No.		b. Cell No.
		(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		c. Fax No.		d. e-Mail
11 Address of party filing charge (street sity state and 7/D code)			,	(b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)				
12. DECLARATION	hand of any law and do a and ball of	Tel.		5) (7)(C)
I d _{(b) (θ), (b)} (7)(e) have read the above charge and that the statements are true to the			(b) (6), (b	o) (7)(C)
I d _(δ) (δ), (δ)(ζ)(c)have read the above charge and that the statements are true to the [b]	(a) (b) (7)(C)	Cell	(b) (6), (b	
I d _(δ) (δ), (δ)(ζ)(c)have read the above charge and that the statements are true to the [b]		Cell	(b) (6), (b) No. (b) (6), (b)	
d(b)(6), (b)(7)(c) have read the above charge and that the statements are true to the (b) (\$ of representative or person making charge) (Print/type and that the statements are true to the (b)	(a) (b) (7)(C)	Cell Fax	(b) (6), (b) No. (b) (6), (b) No.	
I d _(δ) (δ), (δ)(ζ)(c)have read the above charge and that the statements are true to the [b]	o) (6), (b) (7)(C) name and title or office, if any	Cell	(b) (6), (b No. (b) (6), (b No.	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

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8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by refusing to process the Charging Party's grievance for arbitrary or discriminatory reasons or in bad faith.

FORM EXEMPT UNDER 44 U.S.C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE				
Case	Date Filed			
19-CB-301874	8/22/2022			

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.					
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARGE IS	BROUGHT		
a. Name		b. Union Rep	resentative	to contact	
OPEIU Local 8		(b) (6), (b) (7)(C)		
		Title: (b) (6), (b) (7)(C)	
		(3) (-,, (-, (-, /,		
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.	
Office & Professional Employees International Union Local 8 2800 Firs	st Ave	(206) 441-88	80		
WA Seattle 98121-1114		f. Fax No.		g. e-Mail	
				(D)(6),(D)(V)@OPEIU8.org	
h. The above-named labor organization has engaged in and is engagin	ng in unfair labor practices wit	hin the meanir	g of section	8(b) and (list subsections)	
(1)(A) are practices affecting commerce within the meaning of the Act, or the	of the Natio	onal Labor Rel	ations Act, a	and these unfair labor practices	
the Act and the Postal Reorganization Act.	nese unian labor practices an	c practices and	curing commi	icree within the meaning of	
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor p	ractices)		
0					
See additional page					
Name of Employer		4a. Tel. No.	20	b. Cell No.	
Kaiser Permante		(206) 630-13 c. Fax No.	30	d. e-Mail	
		C. Taxivo.		u. e-ividii	
5. Location of plant involved (street, city, state and ZIP code)			6. Employ	er representative to contact	
Glacier 1200 SW 27th S					
WA Renton 98057					
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	r of workers employed	
10. Full name of party filing charge		11a. Tel. No.	O)	b. Cell No.	
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(()	(b) (6), (b) (7)(C)	
		c. Fax No.		d. e-Mail (b) (6), (b) (7)(C)	
11. Address of party filing charge (street, city, state and ZIP code.)				(b) (0), (b) (1)(0)	
(b) (6), (b) (7)(C)					
12. DECLARATION		Tel.	No		
12. DECLARATION I declare that Library e read the above charge and that the statements are true to the	best of my knowledge and belief	101.	(b) (6), (b	o) (7)(C)	
	(b) (6), (b) (7)(C)	Cell		\ /7\/O\	
epresentative or person making charge) (Print/type	name and title or office, if any		(b) (6), (b) (7)(C)	
(1) (2) (1) (7) (2)		Fax	NO.		
(b) (6), (b) (7)(C)		e-M	ail		
Address	(date)	03:03:18 PM		(b) (7)(C)	
	(date)				

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

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8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by refusing to process the Charging Party's grievance for arbitrary or discriminatory reasons or in bad faith.